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ABSTRACT

Those involved in early childhood development must recognize that many of their most cherished beliefs about what is best for children are cultural constructions. This book focuses on quality in large-scale programs for disadvantaged young children in a variety of cultural settings. Chapter 1, "Changing Childhoods," discusses issues which need to be considered in discussions about quality, including changes in childhood in developing societies, the impact of universal child development frameworks, and the role of science and values in defining quality. The remainder of the book uses four studies of early childhood programs in Venezuela, Kenya, India, and France to examine quality development issues. Chapter 2, "Diversity in Quality," describes the four local studies and summarizes the main findings. Chapter 3, "A Framework for Quality Development," presents a three-dimensional model of quality, including stakeholders, quality indicators, and beneficiaries. Chapter 4, "Resources for Quality," proposes a contextual approach to identifying basic quality indicators rather than specifying basic international standards. Chapter 5, "Quality, Children's Needs and Children's Rights," differentiates fundamental and socially constructed children's needs and examines children's rights. Chapter 6, "Quality, Context and Developmental Appropriateness," argues that developmental appropriateness is a product of particular child-rearing contexts and proposes that it be combined with contextual appropriateness to produce practice appropriate to the context of early development (PACED). Chapter 7, "Extending the Principles of 'Contextual Appropriateness'," considers school systems as contributors to perspectives on early childhood program quality. Chapter 8, "Defining Quality through Research and Evaluation," highlights the promise and limitations of research and evaluation studies in identifying quality. Chapter 9, "Steps toward Quality," presents a model of the cycle of quality development in early childhood programs. (Contains 98 references.) (KDFB)

ED 399 037

Martin Woodhead

In search of the rainbow

Pathways to quality in large-scale programmes for young disadvantaged children

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In search of the rainbow

Pathways to quality in large-scale programmes for young disadvantaged children

Martin Woodhead
The Open University
Milton Keynes
United Kingdom

Early Childhood Development: Practice and Reflections Number 10

Bernard van Leer Foundation 1996

About the series

The series *Early Childhood Development: Practice and Reflections* addresses issues of importance to practitioners, policy makers and academics concerned with meeting the educational and developmental needs of disadvantaged children in developing and industrial societies.

The series is a continuation of the Occasional Papers series (numbers 1 to 6) and the numbering starts at No. 7.

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About the author

Dr. Martin Woodhead is a Senior Lecturer in the School of Education at The Open University, United Kingdom. A developmental psychologist, he has written and published extensively on early childhood issues. Dr. Woodhead was a consultant to the Council of Europe project on early education during the 1970s. More recently he was the Programme Adviser to the worldwide BBC documentary television series 'All Our Children'. He is coordinator of the M.A. course in Child Development at the Open University and co-editor of the three-volume series *Child Development in Social Context* (published by Routledge). He lives in Sussex with his wife and four children.

About the Foundation

The Bernard van Leer Foundation is a private institution based in The Netherlands that concentrates its resources on support for early childhood development. The Foundation takes its name from Bernard van Leer, a Dutch industrialist who died in 1958 and gave the entire share capital of his worldwide packaging industry for humanitarian purposes. The Foundation's income is derived from this industry.

The Foundation's central objective is to improve opportunities for young children who live in disadvantaged circumstances. It does this by supporting the development of innovative field-based approaches in early childhood development, and by sharing experiences with as wide an audience as possible in order to influence policy and practice.

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My starting point was the four local studies commissioned by the Foundation. My thinking has been shaped by each of the final reports and by discussions with each of the research teams: Maria Carlota Ruesta, Jesus Yanez, Amelia Zarikian and Ana Giannantonio (Venezuela); Radha Paul and colleagues (Tamil Nadu, India); Barbara Koech and Octavian Gakuru (Kenya); Charles Tijus, Arnaud Santolini and Agnès Danis (France). I also learned a great deal from the programme managers who contributed to the workshops in Caracas, Madras and Paris during 1995, and from the representatives of NGOs who attended the final conference in The Hague in December 1995. To all of these, named and unnamed, I express my thanks. I also thank each of the children, parents, care workers and teachers who welcomed me into their communities, and those who acted as my hosts and companions during my visits to early childhood programmes, especially Maria Peralta, Andal Damodaran and Josette Combes.

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Martin Woodhead
April 1996

Foreword

In December 1993, the Board of Trustees of the Bernard van Leer Foundation approved a project, entitled 'The Environment of the Child' to be implemented by the Foundation itself. The project sought to answer three main questions:

> What is a good environment for children?
> How can this environment be improved? and,
> What does research have to say about this?

The project targeted neither practitioners in the field nor individuals in the academic world, but rather people who were involved in the interface between theory and practice, that is, people working as programme specialists, project leaders, and applied researchers.

The concept of the environment of the child is a very broad one. In terms of the project, the concept was focused on those cultural variables relating to communities and individuals, directly affecting the development of children growing up in poverty, and able to be reinforced and changed by intervention programmes. A well-documented insight into these variables was required, so that the notion of quality which emerged could enhance thinking about this concept.

Following the development of a theoretical framework by Terezinha Nunes (published by the Foundation as Occasional Paper No. 5, *The Environment of the child*), four case studies were carried out by local consultants in India, Kenya, Venezuela and France. Material emanating from these case studies and from regional workshops in 1994 and 1995 formed the basis for a report by Martin Woodhead on 'Pathways to quality in large-scale programmes for young disadvantaged children'. This report was discussed during an International Conference on 11 and 12 December 1995, held to mark the formal ending of the project on 'The Environment of the Child'.

The project has had, and will have, an important effect on the Foundation. Firstly, it has enabled us to reflect on the premises and hypotheses underlying our own work. In this way, the project has provided the Foundation with an opportunity to learn and to think critically about its own position.

Secondly, the project has influenced and will continue to influence the Foundation's programme development role. The report by Martin Woodhead systematises the thinking of the Foundation on quality and perspectives on quality, thus enhancing our role as critical interlocutors with the projects we support in the field.

However, the relevance of the project goes far beyond the Foundation itself. We are convinced that it will help people working in the interface between theory and practice in many different cultural settings to demystify assumed correlations between early childhood development initiatives and the welfare of children later in life.

Rien van Gendt
Executive Director,
Bernard van Leer Foundation

Author's introduction

My first contact with the 'Environment of the Child' project was in the summer of 1994, at a workshop hosted by Bogacizi University, in Istanbul, Turkey. By then, the project was well under way: Terezinha Nunes had completed a review paper on the impact of poverty and discrimination in children's lives (Nunes 1994); discussion workshops on these themes had been held in New Delhi and in Mexico City; four local studies on the role of large-scale, early childhood programmes in Venezuela, Kenya, India, and France had been commissioned; and plans for workshops to share the findings from these local studies with groups of programme managers from each respective region had been made. My task was to draw together the evidence of the local studies in a final report of the project – on quality issues in large-scale programmes for young children. The programmes in question were: the national home day care programme (*Hogares de Cuidado Diario*) in Venezuela; the nursery schools and classes coordinated by the National Centre for Early Childhood Education (NACECE) in Kenya; the network of crèches in Tamil Nadu, India, managed by non-governmental organisations; and the parent-managed day care programme (*Crèches Parentales*) in France.

As a developmental psychologist, I have been particularly interested in the way my subject relates to issues of policy and practice. During the past two decades, studying the boundaries between developmental theory, early childhood education and child care practice, I have become increasingly convinced that much of what counts as knowledge and expertise about children is deeply problematic, right down to such a fundamental idea as 'early childhood development programme'. While concepts provide welcome tools for organising thinking, they also inadvertently sanction a spurious veneer of coherence on diverse childhood realities. 'Development' implies a uniform, progressive growth process towards an implicit, normative image of maturity; 'early

childhood' suggests that there is (or should be?) a common thread in the experience of young children (girls and boys, deprived and indulged, revered and abused, and so on) whatever their life circumstances; and 'programme' (or 'program' in American English) conjures up an image of a highly-planned, systematically-delivered schedule of activities and games. Although I am sceptical about the ubiquity of these expressions, I have no wish to stifle any endeavour to understand and enhance early childhood. My plea is for a more self-conscious and critical reflection on the generally unstated assumptions involved. More particularly, in this report, I focus on an equally ubiquitous fourth concept, **quality**, as it is applied to large-scale, early childhood development programmes for economically and socially disadvantaged young children.

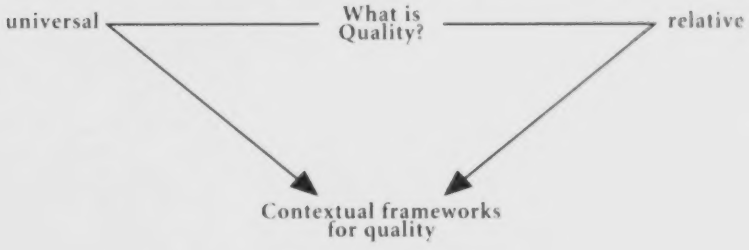
During the early months of 1995, I read reports and attended workshops on this theme of quality. All those responsible for early childhood programmes professed to having issues of quality uppermost in their minds; many had quite strong intuitions about what standards should be set, and there was even some agreement about which quality indicators are important. But consensus evaporated once the conversation turned to particulars: about organisation, staffing, programme strategy, resource availability, relationship to family and community, care and education objectives, and so on. The 'diversity of quality' was reinforced within every community I visited, in Venezuela, Kenya, India, and France. I became acutely aware of my own preconceptions about quality, based mainly on early childhood centres in Europe and North America, and the pre-school experience of my own four children. I worked hard to make these preconceptions explicit, and to reflect on their origins and impact on my perceptions. Despite my best efforts, some of these presumptions about quality are no doubt evident in my descriptions of the four programmes. For this reason, I signal in Chapter 2 that I am offering 'my first impressions'.

When I was in Kenya during my fourth round of visits, I was beginning to wonder whether the word 'quality' had any substantive meaning at all. As we drove back to Nairobi, the sky was filled with a magnificent rainbow. This experience suggested a perfect metaphor to encapsulate the search for quality. English children are told the ancient Celtic legend, that if you dig at the rainbow's end, you will find a crock of gold. I later learned that African children learn a similar legend. It seems to me that trying to pin down 'quality' is a bit like trying to find the crock of gold at the end of the rainbow. We may make progress in the right direction, but we never quite get there! Children learn that the rainbow's beauty is real enough, but the 'crock of gold' exists only as a cultural myth. In the same way, I want to argue that those involved in early

childhood development must recognise that many of their most cherished beliefs about what is best for children are cultural constructions. As with the rainbow, we may be able to identify invariant ingredients in the spectrum of early childhood quality, but the spectrum itself is not fixed, but emerges from a combination of particular circumstances, viewed from particular perspectives.

This, then, is the central message of this report. There is a strong tendency for Euro-American models of quality to dominate research, policy, training, and practice in early childhood development. With a few notable exceptions, this tendency has been fuelled by the universalist aspirations of developmental psychology. I am convinced that universal models of quality are both untenable and unhelpful. At the same time, I am convinced we should not embrace the opposite extreme, an ultimately self-defeating form of relativism. My goal is to steer a middle course, signalled by the principle elaborated in this report: 'Quality is relative, but not arbitrary', (see Figure 1).

Figure 1. Approaches to quality in early childhood development programmes



Universal models of quality are linked with another feature of much Euro-American thinking – the isolation of 'child development' as a distinctive, separable subject both for study and for professional intervention. The limitations of this approach are now widely recognised. Children do not grow up in a vacuum, nor do child care programmes function in isolation. Both are embedded in a dynamic social context of relationships, systems and cultural values. At worst, these two tendencies (towards a decontextualised and a universal view of children's development) have been taken to justify an insular, prescriptive, professional definition of quality within early childhood programmes, with little account taken, except in disparaging terms, of how the experience relates to quality in the rest of children's lives. The alternative is a more contextual, more holistic and more open approach to issues of quality. In this report, I take some first steps in this direction.

A note on terminology

Throughout this report I make a broad distinction between the quality issues experienced by materially-affluent, industrialised, Western societies (notably in Europe, North America and Australasia) and the quality issues facing communities in developing economies of the Third World. The West is ideologically, politically and economically dominant, but demographically rather less significant. Accordingly, I shall also refer to Third World children, families and communities as the Majority World, by contrast with the Minority World childhoods of the West.

Chapter 1

Changing childhoods

Young children are a precious gift. Early childhood is a special time. Through the care and education of young children, a society constructs and reconstructs community and economy, ensures continuity of tradition between generations, and makes innovation and transformation possible. But human immaturity is not just a resource – it is also a responsibility. Children are not incomplete human beings to be shaped into society's mould. They have needs and aspirations of their own, and rights which must be respected. Above all, their childhood is an opportunity. Each young child has a unique potential for development of human capacities, for communication and cooperation, for skill and feeling, for reason and imagination, for practicality and spirituality, for determination and compassion.

These themes are not new. The status and importance of human childhood has been widely recognised in traditions of nurturance, training and initiation throughout the world, among societies that are economically, religiously, and politically diverse. What is new is that these themes are being widely articulated and discussed, researched and written about. The proper care of children is no longer solely a matter of tradition, passed on from generation to generation by example, and through the counsel of elders. To a much greater extent, it is becoming a planned process, a self-conscious activity of appraising and constructing environments that foster a new generation of young children. There are choices to be made and alternatives to consider.

Questions about quality are at the heart of this process of planning for human futures:

> What is 'quality' in the lives of young children? How can it be defined? How can it be promoted?

What role do planned early childhood programmes play in enhancing the environment for young children, especially for those growing up in economically and socially disadvantaged circumstances?

Which indicators of quality make the most significant contribution to children's welfare, care and development, especially in programmes catering for the very youngest age group?

What would be the features of a general framework for quality, that has relevance beyond particular programmes and communities to national and international standards for early childhood?

Quality and change

These questions are addressed in the context of rapid social change. In many societies, experiences of childhood that have remained relatively stable for countless generations are now being transformed within a generation, and for many children, even within the span of their own childhoods.

A well-documented example of this has occurred in rural agrarian societies, where children have traditionally been valued as essential contributors to family well-being. Within a few years of birth they carry out domestic chores, help with cultivation, look after animals and care for younger children. Immaturity has been a reciprocal process of contributing while being cared for, giving while being taught. Numerous factors are now contributing to change, for example: the greater certainty of survival, more adequate nutrition and health, the growth of schooling, the promotion of children's rights, the changing role of women, the shifting economic base from subsistence to cash and wage economies, and from rural to urban living.

Change does not follow a uniform pattern, and there may be disjunction between the expectations of childhood and the realities of living. Nonetheless, as modernisation takes place, so childhood acquires some of the features familiar in Europe and North America. Children are a long-term cost, and are less available to contribute to family tasks, some of which have become redundant. There is an expectation (or at least the aspiration) of an extended period of schooling, with a distant and uncertain benefit to the family and community. As part of this process, reciprocities that were once tangible become more ephemeral (Hoffman 1987, LeVine and White 1986, Broberg and Hwang 1992, Nsamenang

1992). Vast numbers of children, families and communities are caught between the relative stability of tradition and the promise of modernity. Intergenerational continuities are breaking down in the face of rapid social change. In some cases:

> The juxtaposition of the traditional and the new ... have left cultures disorganised and groups of people at a loss about their values and beliefs (Evans and Myers 1994).

Quality and programmes

Programmes of early child care and education are part of the process of change, serving in varying degrees as cause, catalyst, antidote and remedy. During the past 25 years, there has been a global explosion in programmes serving diverse functions: supplementary nutrition, health care, immunisation, crèches for working parents, programmes of pre-school education, and so on. They have focused directly on enhancing children's development, or on supporting the family's and community's abilities to achieve that goal (Cochran 1993; Lamb *et al* 1992).

In part, these programmes have taken over responsibilities traditionally invested in parents, older children and community. But they also reflect new expectations for the quality and character of early childhood, expectations strongly shaped by Western knowledge, technologies and values. One consequence has been a rapid growth of specialist, professional or para-professional 'experts' and practitioners in child health, care and development, supported by district, national and international infra-structures of organisation, training, research and finance.

There is little consensus about the significance of these trends. Optimistically, organised programmes can be seen as the best way of ensuring basic health, welfare and learning opportunities for millions of children growing up in circumstances blighted by poverty, deprivation and social breakdown. Pessimistically, many programmes can be construed as low-quality replicas of institutional solutions which some pioneer nations are now rejecting, especially for their youngest children (Broberg and Hwang 1992). Cynically, early childhood programmes can be seen as a tool for cultural imperialism, driven by the politically, economically and culturally dominant Minority World through various combinations of international aid, child development and curriculum models, training and research. More pragmatically, the evident community demand for large-scale programmes can be taken as evidence of their positive value, at least in the eyes of those most closely involved. Whatever the interpretation, one thing is

certain – questions about quality need to catch up with questions about quantity. Early childhood programmes should be more than a holding base for children who are too young for school but have no place in the community.

Quality and the 0-3s

Quality issues are especially important for the very youngest children, spanning a very wide developmental range, from birth to three years. As the pressures increase on family-based care giving, so the demand for extended day care grows, especially for the youngest and most vulnerable children. Frequently they are accommodated within programmes intended for older pre-school children, in large groups where there is little scope for close attention from an adult. At worst, 100 children may be herded together, watched over by one untrained adult, while parents toil in the plantation or factory. Many babies are strapped to the backs of their siblings, who offer what care and comfort they can. In such extreme cases, the quality issues are transparent.

But most early child development programmes are not nearly so extreme, the quality issues are much less clear-cut, and there is much more scope for debate about the questions: 'what is quality?'. Even in Europe and North America, where resources are relatively generous, the quality of group day care for very young children is disputed. Alternative approaches to care are being explored, including more informal models of community-based care, parent support and education, plus wider family policy initiatives improving the compatibility of care giving and employment (Melhuish and Moss 1991). There is an urgent need to address issues in the care of 0-3s throughout the world.

Quality and resources

In most countries, early childhood services are expanding at the margins of national education/welfare systems, which are themselves often founded on a very precarious financial base. This is far from ideal: any quality initiative should include advocacy for greater resources. One promising approach is to frame resource issues in terms of cost-effectiveness. By demonstrating that there is a measurable return on resources invested in a programme, quality issues can be presented not just as costs, but as returns on investment, in terms of reduced welfare costs or enhanced achievement later in the life-cycle (Beruetta-Clement *et al* 1984). But for the foreseeable future, most steps to improve quality must realistically be initiated in the context of very low resource levels. A key question is whether it is possible (or indeed desirable) to set

minimal resource standards that are consistent with children's basic welfare.

Quality and development

For most early childhood programmes in the Majority World, the priority goals have been to ensure adequate nutrition, basic health and secure care. These goals have the advantage that they can be translated into tangible, outcome indicators – visible evidence of cost-effectiveness. As these goals are met, attention is turning to indicators of psycho-social and educational aspects of programme quality. Defining and measuring these aspects of programme quality is much more problematic. Measuring children's psychological growth is much less tangible than measuring their physical growth, always assuming that agreement can be reached about what aspects of psychological development are important. The quality of early childhood programmes must be re-assessed in terms of methods and curricula appropriate to goals of socialisation, education and cognitive development.

Key questions include: How can the quality of the environment be defined in terms of these goals? How should they be expressed in the environment experienced by children, including their relationships with their caregivers? More fundamentally, how should these goals be translated into tangible indicators in a way which takes account of the context of life circumstances, values and practices (traditional, transitional and modern)? And more practically, what are the most promising strategies for implementing change to enhance the quality of children's learning experiences (through professional training, participatory parent education, action-research etc). Finally, can a quality framework be identified that is both developmentally appropriate and realistic in terms of available resources?

Quality and globalisation

There is no shortage of attempts to specify what makes for good quality in early childhood. Ironically, one of the reasons for examining frameworks for quality is that some of these attempts have already achieved a global influence. Highly selective, stereotyped perceptions of childhood have been exported far from their origins in industrial social conditions (Boyden 1990). Sometimes they take the form of curriculum models, more generally as 'ways of thinking' about childhood. They are being applied in contexts far removed from their cultural origin. As Robert Myers put it:

'Attention to quality seems particularly important when considering how values are being imparted in the socialization process. If one had to guess, the guess would be that early childhood programmes more often than not are taking their cues from imported models that reinforce value-shifts towards the individualistic, production-oriented cultures of the West. Is that where we want to be?' (Myers 1992, p.29).

Adoption of universal frameworks on child development is generally welcomed as a sign of progress. In some cases this may be entirely appropriate. To romanticise the attitudes and socialisation practices that may be supplanted in the process would be wrong. Some 'traditional' child-rearing beliefs and practices can be detrimental to children's basic health and well being (Evans and Myers 1994). But a more balanced picture must acknowledge that many features of 'modern' child-rearing can in their own way be just as detrimental to harmonious development. Before quality issues can be properly addressed in a global context, a debate needs to take place about the future of childhood.

Millions of tomorrow's children face modernisation, urbanisation and globalisation. My concern is twofold. First, I challenge the global distribution of any one single framework on quality. Such a framework might inevitably lead to a world of uniformity, a standardised recipe for the quality of childhood. My second concern is that implementing contextually-inappropriate standards of quality will prove more disruptive than constructive in fostering children's development. A first step in countering these trends is to become more aware that dominant images of quality in early childhood are constructed in a particular economic and cultural context.

Quality, science and values

The medical and social sciences, and especially psychology, offer the most objective reference point in any attempt to define universal

criteria for 'quality' child development programmes. This is especially true for basic care, nutrition and health. Thus, programme planners can draw with some confidence on the best available evidence about the causes and remediation of malnutrition, the benefits of immunisation and so on. The grounds for planning are much less secure where children's psychological development is concerned (Burman 1994). Much research that apparently offers a firm, universal scientific foundation turns out to be embedded in a particular childrearing context, in terms of social ecology and child care values:

> One of the challenges ... is how to maximize what can be provided for the child by interweaving practices that 'scientific' evidence would suggest a child needs with effective traditional child rearing practices and beliefs. (Evans and Myers 1994).

This idea of interweaving the scientific with the traditional is a considerable advance on the myopic, possibly arrogant assumption that so-called modern views of child-rearing are superior to traditional ways. But it does not go nearly far enough. Perhaps Evans and Myers' use of quotes around the word 'scientific' reflects their awareness that science is not a neutral benefactor. 'Interweaving' entails more than building on traditional values and practices; it generally entails their displacement by the hidden value assumptions embedded in the science of developmental psychology. Even the basic vocabulary of the enterprise – 'meeting needs', 'promoting intelligence', 'reaching full potential', even the word 'development' itself – reflects particular ways of thinking about the nature and goals of childhood (Kessen 1979; Ingleby 1986; Gardner 1984, Woodhead 1990; Nunes 1994; Stainton-Rogers and Stainton-Rogers 1992; Morss 1996).

For example, when psychologists and educators speak of 'development', they typically mean more than just growth and change. The word is used to imply change in particular ways, along a particular pathway, in accordance with particular expectations of maturity. The definition provided by an influential textbook in child development will illustrate the point:

> In the first twenty years of life, these changes result in new, improved ways of reacting – that is, in behaviour that is healthier, more organized, more complex, more stable, more competent or more efficient ... We speak of the advances from creeping to walking, from babbling to talking, from concrete to abstract thinking as development. In each instance we judge the later appearing stage to be a

> more adequate way of functioning than the earlier one (Mussen *at al.* 1984, p.7).

Imported child development values relay the subtle message to Majority World parents that their traditional ways are inadequate, that they need to throw off 'common sense' ideas and folklore 'superstitions' and embrace modern, scientifically-based child-rearing practices. For example, in a *Handbook of Child-rearing*, Thai experts write of the traditional beliefs that prevent parents making use of scientific knowledge in child-rearing:

> Giving the child more of the independence the child needs and making less use of power and authority ... will shake the very roots of those Asian families where authoritarian attitudes and practice are emphasised (Suvannathat *et al* 1985).

Perhaps 'shaking the roots' is an essential step forward, but the real justification has little to do with either science or children's needs.

Outline of the report

In this report, I take the four local studies conducted as part of the Bernard van Leer Foundation project on 'The Environment of the Child' as a starting point for examining issues of quality development in early childhood programmes. My aims are (i) to make explicit the frameworks of thinking that underpin judgements of quality; (ii) to explore the possibility of working towards a shared frame of reference, which is context-sensitive, allowing for diversity, but which is also recognisably consistent in terms of underlying values and knowledge about child development; and (iii) to apply this framework towards a better understanding of the quality issues that confront large-scale early childhood programmes.

Chapter 2

Diversity in quality

This chapter introduces the four local studies conducted in Venezuela, Kenya, India and France as part of the 'Environment of the child' project. Subsequent chapters take the experience of these local studies as the starting point for addressing questions about quality. For each country, I provide brief details of the historical origin of early childhood programmes, especially the particular programme that became the focus for investigation. I also present an overview of each study and summarise the main findings. More detailed discussion of selected themes is provided in the 'boxes' which recur throughout this report.

These studies draw attention to the extraordinary diversity in environments for early child development. They were carried out in contrasting economic and cultural circumstances, and they focused on quite different models of early childhood programmes. This variety must be the starting point for addressing issues of quality. The programmes studied are not in any way representative of early childhood programmes within a particular country or region. In most cases, they represent one of many kinds of programme, within a sector which is distinctively eclectic.

Terezinha Nunes' analysis of the 'environment of the child' was the starting point for the four local studies (Nunes 1994). Each of the studies addressed questions about the role of family and pre-school programme in children's development, as well as the interrelationships between these two settings.

Figure 2. Family and pre-school as linked ecologies for child development

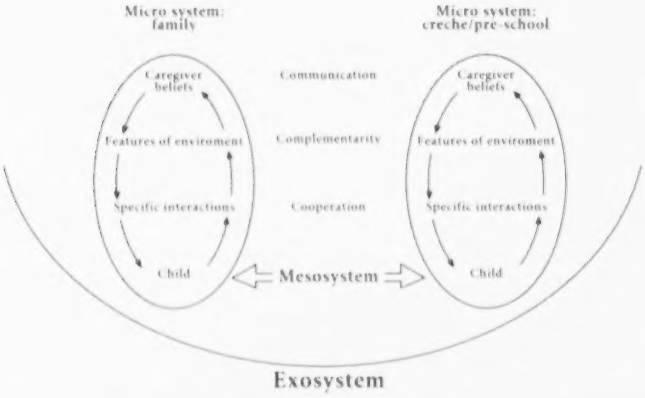


Figure 2 summarises a conceptual framework for the studies, combining an 'ecological' approach (Bronfenbrenner 1979) with the concept of 'developmental niche' (Super and Harkness 1986). Children are depicted as growing up in the context of the micro-systems of family and of pre-school. Within each micro-system, the impact of the environment is powerfully mediated by the beliefs and expectations of care givers, as expressed through the extent and character of their specific interactions with children. The relationships between the micro-systems, in terms of shared or conflicting mutual beliefs of care givers, as well as active points of contact, constitute the meso-system. Finally, although children's immediate experiences are directly shaped within the micro- and meso-systems, indirectly they are strongly influenced by wider forces, such as the employment patterns of parents (the exo-system) and by the overall economic and political situation (the macro-system).

Of course, children's experience of their environment is not nearly as 'tidy' as this model suggests; there may be multiple, overlapping changing micro-systems. Nonetheless, this model does provide a framework for describing the emphasis of the four local studies.

The studies in Venezuela and Tamil Nadu (India) concentrated on the micro- and meso-systems. They comprehensively assessed the characteristics and interrelationships of home and pre-school environments (in terms of physical features, attitudes and beliefs of care givers and relationships with children). In Kenya, the research emphasis was on the impact on parental resources and attitudes of wider influences in the exo-system. Finally, whereas in Venezuela, India and Kenya the pre-school programme was relatively separated from the family context, the study in France examined a pre-school

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initiative managed by parents, with parents acting as helpers, thereby bridging the divide between the two key micro-systems in young children's lives. This study was also much more closely focused, and concentrated on the quality of the specific interactions between parent-helpers and the children in their care.

Although the local studies initially focused on the 0-3 age group, in only one context, France, was this age group strongly represented. For the other countries, India, Kenya, and Venezuela, the focus was on the situation of 2-3 year-olds who were attending provisions intended mainly for 4-6 year-olds. In the case of Kenya, very young children were passively absorbed into programmes with a strong pre-academic orientation. This gap in research, information and policy analysis about 0-3s is itself indicative of the urgency of giving attention to this age group.

Although they started from a common set of questions, each local research team designed their particular study to take account of local circumstances and their own views of research priorities. There is no shared methodology that would make for direct comparability; the studies describe locally-generated systematic accounts of the place of large-scale programmes in the lives of young children.

A key theme of this report is that quality is shaped by perspective. This applies equally to the investigators who carried out the small scale studies. It also applies to my own perspective in offering brief descriptions of some of the pre-school settings as 'first impressions'. I fully acknowledge that other observers might see 'quality' in these settings in very different terms.

Venezuela

Venezuela is a modern, relatively homogeneous Spanish-speaking society (except for the indigenous Indian tribes of the Amazonas). It is an urban society, largely created following the discovery of oil in 1914. Ninety per cent of the population live in the urban areas, many in 'shanty' dwellings ringing the major cities, especially Caracas. These are relatively new communities and lack the traditional community structures that might regulate and support child care. It is a young society, with 4 million children under the age of six, or approximately 20 per cent of the population. Forty per cent of the population is under the age of 15, and 20 per cent of births are to adolescent mothers. Nuclear/single parent family structures predominate, with 30 per cent having women as heads of households. Attendance at school is the rule for 88 per cent of 7-12 year-olds, but repetition rates are high at 23 per cent, with repetition and drop out particularly concentrated among the

poorest sections of the community (Pool 1994).

The day care programme, *Hogares de Cuidado Diario*, was a response to the growth in women in employment during the economic boom years of the 1970s. Initially, local communities found their own way of meeting the demand for day care through neighbourhood women taking groups of children into their homes during working hours. In 1974, when President Perez was elected, the First Lady began to work with the *Fundación del Niño* to transform these informal arrangements into an organised programme. By 1978, the *Hogares* programme was serving 6,300 children, a number which slowly increased to 10,200 by 1988. During this early period, an evaluation by High/Scope (Fisk 1983) recommended improving the quality of care and the training of the *Madres Cuidadoras* (day care mothers).

Major expansion of the programme took place in 1989, when President Perez was re-elected. A Presidential Commission planned for the programme to grow to 350,000 children by 1994. In fact, by 1993, 240,000 children (mostly in the 2-4 age group) were attending the programme. This expansion took place in a very different economic context from 1978. Concerns about young children's health and nutrition re-emerged in the wake of economic recession and high unemployment levels, especially among lower income groups. In terms of a five-fold socio-economic stratification, the percentage of the population described as living 'in critical poverty' rose from 38 per cent to 43 per cent between 1981 and 1990. Whereas the official 'minimum salary' had been a little greater than the cost of feeding a family, by 1990 it was no longer adequate for basic subsistence.

At the same time, medical statistics suggested that improvements in infant mortality rates had slowed. Consequently, the official objectives of the recent expansion have included re-targeting the programme towards the children of unemployed parents, to enhance their ability to carry out child care tasks and promote the health, welfare, and development of their children. Some additional reforms have included extending the numbers of families exempted from paying fees and establishing *Multihogares* (Multi-homes), providing group day care. Most important, the programme came under central control of the Ministry of the Family, while operational running was devolved to an increasing number of NGOs (297 by 1993). During 1995, the programme was again under review, with efforts to reduce the costs to central government by increased devolution of management and financing to NGOs and district administrations. The *Hogares* programme is the major day care programme in Venezuela, serving children as young as two. However there are many other forms of pre-school provision, attended by 37 per cent of 3-6 year-olds (Teran de Ruesta *et al* 1995).

Box 1

My first impressions – day care 'multi-homes' in Puerto Ayacucho, Venezuela

The *multihogar* (multi-home) is tucked in among a small cluster of houses not far from the centre of town. The presence of a day care centre is signalled both by an official sign above the unglazed window, and *'Bienvenido'* brightly painted by the door, along with near life-size images of a girl and boy playing ball. It's an ordinary house, just like the rest of the neighbourhood – single storey, built out of concrete blocks, rendered with cement, with a simple corrugated iron roof supported on a steel frame. The floor is concrete, polished shiny black by thousands of small footsteps. Three-year-old Ruben was standing on the verandah and warned the day care mother of our arrival. Inside it was hard to adjust to the darkness of the room after the intensity of the sunlight outside. The main feature of the first room was a large notice board with details of the week's menu, notices about children with medical complaints etc. The children were in a second room – much the same as the first, except for two lines of small tables, and child-sized chairs. They were waiting for lunch, most sitting very patiently, or perhaps not daring to express their impatience. For the babies and toddlers, it was more of a trial, (one or two were no more than a year old), held in the arms of a day care mother, or doing their best to sit on hard chairs designed for considerably older children. Finally the meal arrived.

Ever since the programme began in 1974, providing good nutrition has been a major goal of the day care homes. Two of the babies had not been able to wait. They had already been fed and put to sleep in a third smaller room. One was already flat out, fast asleep, face against the sticky plastic of the mattress, and bottom in air, looking like an advert for disposable nappies. Another was more restless, despite being nestled within a hammock and cooled by a large overhead fan. Each time this baby became fretful, one of the day care mothers went over to revive the hammock's rhythmical swinging, soothing the baby instantly.

There were three day care mothers to look after the 30 children. Most children are dropped-off by 7.30 in the morning and few collected before 5.30 in the afternoon. Although they are managed by a local NGO, they rely on the Ministry in Caracas to fund the meals and pay the salaries. But the boom years of the 1970s and 1980s are over. There is a squeeze on all national programmes. Sometimes the money doesn't come through – 'Then we feel like volunteers!' remarked the senior day care mother who has been doing the job ever since her own children started school. In another town we came across a *multihogar* that hadn't been open for weeks, because of the shortage of funds. Certainly there isn't much evidence of resources for play materials or teaching aids either – not even the money to buy some painting paper or a football – even though many of these children's families can afford a TV and a few run a car. The day care mother is philosophical. She remarks, 'Everything we do has to come from inside my head'.

Overview of the local study in Venezuela

The local study was designed within a framework suggested by cultural studies of early child development, notably the 'ecological' model of Urie Bronfenbrenner (1979). First, the researchers sought to describe features of the two key micro-systems for young children's care (their homes and their day care homes), in terms of physical conditions, the characteristics of care givers and their interactions with children. Second, the researchers examined the communication between micro-systems, the relationship between mothers' versus day care mothers' expectations of the programme, and expectations of the children (the meso-system). Finally, the

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researchers looked at the wider contexts of care in the family and day care home, in terms of support given by the wider community, communication with the day care home, and expectations of the programme.

The Venezuelan study was carried out within two regions, one predominantly rural/rain forest, the other predominantly industrial/urban. In fact, little difference was found between these areas. The investigators carried out an initial total population survey of all 2,250 day care mothers in these two regions, in both *hogares* and *multihogares*. From these interviews, a sample was identified of 30 *hogares* and 10 *multihogares*, stratified in terms of key variables, notably the size of the group, and educational level and experience of care givers. For each location, those involved with the programme (care givers, *promotores*, mothers, children and community members) were studied by means of interviews, observation of care practice and child assessments.

The study illustrates the problems that can arise when a large-scale programme is expanded in a short time period, with low and diminishing material resources. The 'official' purposes of the programme have shifted towards targeting the most vulnerable groups, yet the socio-economic profile of children in attendance suggested that the programme is failing to reach the most disadvantaged groups. At the same time, the very severe financial constraints mean that the emphasis is mainly on basic nutrition, health, and providing safe and secure care. The study also revealed significant differences in organisation, staff roles and child care between the *hogares* and the *multi-hogares*.

The study is a rich source of information. A notable feature is the extensive comparisons made between micro-systems, in terms of the beliefs, values and practices of the day care mothers and the children's own mothers. Although the programme is designed on an informal, family day care model, there are marked differences in perspectives about the goals of the programme and the functions of the day care mothers, all suggesting a strong case for greater dialogue/communication. Secondly, observations of child care practice revealed discrepancies between what children are actually doing, and how care givers perceive their role in children's learning. Training on curriculum/child development/assessment issues is a priority for the *promotores*. They have a key role to play in developing all aspects of the programme, and so need to have their position enhanced. Others involved need to have their roles clarified.

Kenya

Unlike Venezuela, Kenya remains a predominantly rural society, of diverse ethnic and racial groups, with 20 distinctive language groups. Until recently, child care and socialization has been governed by powerful family/community structures and traditions, a phenomenon well documented by anthropologists and cross-cultural psychologists (for example, Whiting and Edwards 1988; LeVine *et al* 1995). These traditions remain strong, but few communities have been unaffected by economic and social change. Eighty-eight per cent of women still live in rural areas. By tradition, they take the major responsibility for cultivating subsistence and cash crops; patterns of shared care (with older siblings, relatives, etc.) have been the norm (Kipkorir 1993). But family life styles are changing, these informal support systems for child care are being eroded, and approaches to child-rearing are being challenged by modern trends. Numerous linked factors are contributing to rapid social change, including very rapid population growth (from 16 to 24 million between 1980 and 1992, UNICEF 1992) with consequent pressure on the infrastructure of services; the creation of a rural landless class due to the subdivision of the family plots to the point of non-viability even for subsistence (20 per cent of rural households); the shift to a wage and cash economy and the migration of women and men away from their families in search of work in the towns or on the large plantations (tea, coffee, etc). These trends have been taking place against a background of economic crises associated with world recession. Structural adjustment programmes have been designed in the long term to strengthen the economic base, but in the short term they have placed additional pressure on the unskilled urban and rural poor. Forty-seven per cent of the urban population live in very low income neighbourhoods, and of these, 30 to 40 per cent are described as 'absolutely poor' (UNICEF 1992).

Kenya is remarkable among African countries in having a well-established system of community-run, pre-school education which originated in the colonial period, and spread during the 1960s after independence, and after the initiation by President Kenyatta of the principle of '*Harambee*' (mutual responsibility for self-help). By 1970, there were already 300,000 children attending pre-school classes, and by 1989 that figure had risen to 802,000, or 30 per cent of 3-5 year-olds (Kipkorir 1993). Although concentrated in the centres of population, the initiative to establish pre-school groups can be found even in the most remote rural villages. These groups usually take the form of nursery units or classes attached to primary schools and are frequently managed and run by parent/community committees, often with minimal financial resources and equipment.

Since 1980, formal responsibility for the administration and regulation of pre-school education has been vested in the Ministry of Education. In 1982, the Ministry set-up the National Centre for Early Childhood Education (NACECE) as the coordinating centre of a network of District Centres for Early Childhood Education (DICECE) with responsibility for training, curriculum development and research. This initiative, originates from the Pre-school Education Project, which was established in 1971 as a collaboration between the Ministry of Education and the Bernard van Leer Foundation.

Box 2

My first impressions – pre-school education in the villages of Machakos, Kenya

Mungula community is only a short distance from Machakos, the main town and administrative centre of this relatively densely populated agricultural region. This Kikamba speaking village extends over 20 sq km of hillside which is intensively cultivated for bananas, maize, beans and a cash-crop of coffee. The village has a population of 8,500, over 25 per cent of whom are attending one of three primary schools. There are also seven nursery schools, each attended by over 40 children. In the one nursery we visited there were at least 60 children in the care of one teacher. Most were four or five years old but a few were as young as two, accompanying their sisters to school. These girls would traditionally have been expected to mind the baby while mothers worked the land. Now, with the expectation of universal schooling, most of the under-threes were being cared for in the community, by grandparents and by mothers themselves. There is not a high demand for care for 0-3s in these villages. It is in the plantations, and in the cities where the inadequate care arrangements are something of a scandal.

In this village, the first issue on people's minds is ensuring their children's basic health. Most of the children in the pre-school class were bright-eyed, alert, and healthy-looking, largely because, unlike the previous year, the village had enjoyed a good harvest. It is a constant anxiety whether the community will have enough to be able to feed their children properly. As one parent put it: 'Children can't play well if they haven't fed well.'

Without exception, the children were sitting very still and quiet on the rows of benches. They were waiting for their cue from their teacher, before bursting into songs in unison. Form and order were the features of this classroom, with the children dressed in uniform, sitting in their places, girls to one side, boys to the other. After the songs, the class began alphabet work. They chanted out their letters using a British-made, illustrated alphabet wall frieze. Language and literacy are high priorities for every nursery class in Kenya. The expectations on young children are formidable. If they are to have any chance of success in a highly competitive school system, these village children must master not only their mother tongue, Kikamba, but also Kiswahili, the national language, and most importantly, English, which is the medium of instruction and examination in the later stages of schooling.

The nursery school is a community initiative, and most of the community seemed to have turned out to receive the visitors, with as much formality and deference to perceived authority as had been shown by the children – male elders on one side, women on the other side, children behind, community leader, head teacher and guests at the front. Parents were convinced about the importance of the pre-school. But they were also anxious about whether their children would be able to attend. There are many hidden costs to families, especially since they were expected to contribute towards upkeep, books, and the compulsory school uniform. These costs discourage the poorest families, who can in any case also see the value of children helping them cultivate their small plot of land, or collect water, or look after the younger children.

Pre-school classes provide basic care mainly for children aged 4-5 years whose 'traditional care givers' (older siblings) now attend school; they also serve as a catalyst for community child health/nutrition initiatives. But the main focus of Kenyan pre-school classes is on social training, towards the teaching of the languages of education and commerce (Kiswahili and English) and towards preparing children for school. Small numbers of two and three year old children are admitted to these classes; there are a few (mostly private and costly) urban day nurseries, but for the most part, there is no provision for this youngest age group. The infrastructure for infant/toddler care is under pressure, not just in the cities, but also in the villages, where older siblings may be kept away from school or mothers may leave the village in search of work leaving their children, including tiny babies in the care of older relatives. These circumstances exert a strong pressure towards passive absorption of small children into the pre-school, often in the care of older sisters or brothers.

Overview of the local study in Kenya

The study focused on the contexts for child care, exploring what material and socio-cultural resources were available to families and communities, and how well these resources were being used. The investigators argued that the quality of day-to-day care is mediated by the beliefs, expectations, and practices of care givers; this in turn shapes the experiences and development of children (Gakuru and Koech 1995).

The study was carried out in Machakos District, a small town surrounded by numerous Kikamba-speaking villages and small settlements, approximately 60 kilometres south east of Nairobi. The isolation of many of the study sites presented linguistic, logistical and cultural obstacles, limiting the possibility for carrying out an orthodox research design, and encouraging the investigators to evolve a participatory process in which DICECE trainers, community leaders, village elders, teachers and parents all contributed. Local Kikamba-speaking research assistants were appointed to establish the confidence of communities and conduct fieldwork in a series of ten case studies (each of a cluster of small villages) examining the environment of 300 three-year-olds. The case studies included interviews with parents, observations/assessments of children, as well as group interviews with community leaders. For the most part, these interviews centred on attitudes to childrearing. Although there were 22 nursery schools/classes in these communities, very few of the three-year-olds attended. Where they did attend, their ability to participate in the programme was marginal, since the curriculum focused on preparing children for entry to school.

The study presents a profile of closely-knit communities where traditional lifestyles and values shape child care practices. Many of the communities are largely dependant on subsistence agriculture. For these communities, there are serious resource pressures on families to ensure their children's nutrition, health and growth. During the year of the study these had been exacerbated by failure of seasonal rains. The authors argue that for certain communities, fundamental support/intervention is a prerequisite (in terms of both agricultural development and nutrition programmes). In other communities, the issue was less about resource endowment, and more about utilisation, which requires intervention at community development level, to which pre-school initiatives can contribute.

Where three-year-olds are admitted to pre-school (and this is a trend), the already formal programme is not adapted to their development level. There is an urgent need to consider alternatives to the current pre-school model. More generally, the authors of the local study conclude that communities require professional guidance, information and ideas to support their efforts to build child care/education environments appropriate to the changing social context. The emphasis should be on encouraging community mobilisation towards sustainable targets, supported by small scale financial investment and cooperative schemes (Gakuru and Koech 1995).

India

In India, there are estimated to be over 143,000,000 children under six years, around 40 per cent of whom are growing up at the level of absolute poverty (defined as a level of resources insufficient for even basic nutrition). During the thirty years after 1960, the infant mortality rates decreased from 165 to 90, and the current figure is 83 per 1,000. The death rate for under-fives is 124 per 1,000 (UNICEF 1994). In this context, health care, immunisation and nutrition remain very high priorities. Another priority relates to population growth. Although the rate of growth is projected to decline during the final years of the century, survival rates combined with longevity mean that every year, India must incorporate additional numbers of people equivalent to the population of Australia. India is well known for crowded city slums, yet 75 per cent of the population is rural, living mainly at subsistence level. In cities and countryside alike, communities retain a powerful sense of shared identity, belief and tradition, reflected in an enduring social structure, characterised by hierarchy and inequality in respect to age, gender, class, and caste (Bernard van Leer Foundation, *Country Statement* 1994).

Early childhood programmes, modeled on British and European lines, have been established since the nineteenth century. Maria Montessori travelled extensively in India during World War II, and left a legacy of schools and teacher training programmes. Large-scale attempts to promote the development of disadvantaged children date from the first Five-Year National Plan in 1950, and the introduction of '*Balwadis*' (Children's Centres). However, these failed successfully to target the most underprivileged children (Verma 1994). The most significant initiative in this direction came in 1975 with the launch of the Integrated Child Development Scheme (ICDS).

Focused on mothers and young children, this integrated package of health, nutrition and education has grown steadily. Mainly funded directly by the government of India, it now serves 18,600,000 children and mothers mainly in poor rural and tribal areas. The ICDS's main functions are feeding/immunisation; child care provision is incidental and educational activities have received low priority (Siraj-Blatchford 1994). Although there are substantial numbers of nursery schools/pre-primary classes as well as crèches in India, neither has anything like the numerical significance of ICDS, nor are they as significant as the Noon Meals programme, which serves a daily meal to vast numbers of pre-school and school-age children, as well as to the elderly.

The local study was focused on one particular sector of provision (the NGO crèche programme) in the State of Tamil Nadu. These crèches, regulated nationally by the Central Social Welfare Board since 1953, aim to provide an integrated programme of day care, health, nutrition and education serving two-to-five year-old children of working parents or those unable to provide adequate care. More than 30 NGOs provide 900 crèches in Tamil Nadu and serve around 22,000 children; they operate in parallel to factory crèches, and plantation crèches (Swaminathan, undated). One major crèche provider is the Indian Council for Child Welfare (ICCW), a national NGO which provides an 11-month, full-time training programme preparing crèche workers for the whole of the voluntary sector.

Box 3

My first impressions – NGO crèches in Tamil Nadu, India

Fifty children between two and five years of age were lying in rows, some on sleeping mats, others on the cool marble tile floor, resting after their lunch. Their crèche was one of the first to be set up by the Indian Council for Child Welfare nearly 30 years ago. It was linked to a government-initiated slum clearance scheme, to replace closely-packed traditional huts with three storey concrete tenement blocks in this fishing community overlooking the Bay of Bengal. The crèche has no budget for equipment, toys and games. All resources are fully spent on two items – food for the midday meal, and the wages of the staff. One rupee, five paise per child per day is the meal allowance allocated to the crèche. (The total for all 50 children converts roughly to the cost of a pot of tea in a three-star Madras hotel). The same economics apply to staff costs. The crèche workers' level of pay is little higher than that of the low pay workers whose children they care for – 500 rupees per month, (or roughly the cost of a meal for one in that same Madras hotel).

A few miles away there is another crèche, run by a different NGO, in one of the poorest dhobi communities in the city. A bamboo frame supports the corrugated iron roof of the crèche. The side panels are of raffia, damaged in places, but woven together by nature through a vigorous climbing plant. When we visited, 24 small children were seated in a circle on the compacted mud floor. Songs and rhymes, and sitting quietly appear to be the main elements of these children's curriculum. Most of their mothers are working in a nearby beedi (cigarette) factory, or as street vendors, or as housemaids. Knowing their children are safe, and that they will be fed is as much as these parents can hope for, at least it means they can go to work with peace of mind. Inside the crèche there are no toys or play materials. If there were, they would be kept on a high shelf – far too precious to entrust to small fingers. In a community where adults have very few material possessions, it is hardly surprising that children have virtually none.

One hour's drive away, in Potheri village, the children have a very different experience. Community enterprise has resulted in, not one, but three crèches, all full of young children and full of activity. As we arrived, a group was outside, enacting a long, well-rehearsed colourful story in mime. This was followed by an energetic alphabet game. Inside, some of the younger children had been given some simple activities: bead-threading, nested boxes, an abacus. For the dedicated care workers, providing individualised activities, caring for children barely two years-old, while at the same time preparing the five year-olds for school (all with ratios of 1:25) is, to say the least, a daunting task.

Overview of the local study in Tamil Nadu

The study was based in 44 crèches run by four of the leading NGOs in Tamil Nadu: The Indian Council for Child Welfare, Tamil Nadu Branch; The Indian Red Cross Society, Tamil Nadu Branch; the Indian Women's Association, Madras; and the Guild of Service, Central Madras. Each crèche was located within a separate community, with 27 in the city of Madras and 17 in the rural communities of Chingleput District. For each crèche, the investigators carried out interviews with the care worker; made observations of the crèche environment; made developmental observations of 10 children aged 3-4; observed these 10 children in their home environment and interviewed their mothers; carried out a group discussion with the older women in the community; and carried out interviews with the responsible NGO (Paul 1995).

The study examined the relationship between the children's family environment and the care and education provided in the crèche, as well as the relationships between the crèche worker and parents. The young children's development took place in home environments with very low levels of material resources. Children suffer health hazards and inadequate nutrition. At the same time, their social and emotional environment is rich, secure and supportive. The authors note that high expectations are placed on mothers to carry out their role, which they generally do in a caring and concerned way; neighbourhood help is offered and neglect is condemned.

Resources are also scarce in the crèche, where one care worker is responsible for a group of 25 children, usually with very little equipment. Unless staff are highly resourceful, this places constraints on the opportunities for learning. Not surprisingly, there is a disparity between what the care workers claim to know about children's development and what was observed in practice. As an illustration, the authors argue that considerable potential exists to educate parents and the community about health issues and child development. At the same time, crèche workers are ill-prepared to carry out this task. Because they tend to focus on children, they may dismiss parents' potential and may underestimate their own potential to influence parental beliefs and practices. The authors argue that there is a need, through enhanced practical training, to reorient the crèche workers to this aspect of their work. Finally, the crèche programme mostly caters to the four- to five-year old age group, and thus the main orientation is to pre-primary school work. Where there are two and three year-olds, the crèche workers rarely have the time or resources to adapt the programme to their stage of development (Paul 1995).

France

The local study in France is the only one of the four focused on a large-scale programme specifically designed to provide day care for 0-3 year-olds. This reflects the extent and range of child care arrangements in France which, for many years, has offered pre-school services to a higher percentage of children than most of Europe. At the core of this provision is the system of *écoles* and *classes maternelles* (nursery schools and classes). Already by 1968, 14 per cent of 2 year-olds, 51 per cent of 3 year-olds, 79 per cent of 4 year-olds, and 89 per cent of 5 year-olds were attending, many of them for a full school day. By 1976, these statistics had risen to 26 per cent, 79 per cent, 97 per cent, and 99 per cent respectively (Woodhead 1979a). These developments have taken place in the context of a highly centralised and relatively formal education

system within which nursery schools form an integral sector. This was reflected in the tradition of common training for teachers, the high ratios of children to teachers (as many as 35 to 1, supported by untrained assistants), and a more regimented programme of activities. All of this occurred at a time when other European countries (such as Britain, the Netherlands, Denmark and Sweden) were fostering a more individualistic, child-centred, play-based philosophy (Woodhead 1979b).

For many families, full time nursery schooling solves the problem of arranging adequate child care for 3-5 year-olds; it is also valued as a preparation for school. However, in a country where the majority of women work, the very youngest children are much less adequately catered for. For these children, French parents face a variety of options, notably: childminders, family day care centres and crèches. All of these options are regulated by the *Direction Departmentale des Affaires Sanitaires et Sociales*, DDASS. Eighty per cent of the crèches are run by municipalities, 17 per cent by DDASS itself. The remaining three per cent comprises the private and voluntary sector. The French local study was focused on the largest organisation within this numerically relatively small, but in policy terms highly significant private sector, namely the parent-run day care centres, known as *crèches parentales*.

Originating in the 1970s, the movement had grown so much that by 1981, a national coordinating organisation was formed (*Association des Collectifs Enfants, Parents, Professionnels* – ACEPP). ACEPP acts as a federation of centres; it gathers information, carries out advocacy work, and advises parent groups on how to get started, how to organise finances, and how to work with the state authorities. *Crèches parentales* are now officially recognised as a valuable alternative to traditional care; ACEPP has attempted to negotiate one third of the funding from central government, one third from the municipality, and one third from the parents. About 1,000 crèches are now in operation, mainly in urban areas. The idea has appealed mainly to professional, middle class parents, interested and able to give the commitment of time, energy and expertise to managing a crèche and spending around half a day a week looking after their own and other people's children. All the crèches now appoint some professional staff to provide continuity and a reference point for the children and the parent-helpers. Most of the crèches are quite small, and thus retain a family atmosphere; staffing is calculated on a ratio of one professional and two parents to 16 children.

Recently, ACEPP has worked towards extending the philosophy of *crèches parentales* to the more disadvantaged groups in French society, especially to the 4,000,000 immigrant families that

constitute 6.9 per cent of the population (Combes 1992). The main goals of this initiative have been twofold: to develop a multi-cultural curriculum appropriate to the *crèche parentale* and to combat the widespread belief that economically disadvantaged parents are not capable of providing a high quality of care, attention and learning experiences appropriate to their young children. There are now 40 multi-cultural crèches in operation. These crèches, and the goals that inspired them became the starting point for the study.

Box 4

My first impressions – *Crèches Parentales* in Paris, France

There was no way of knowing we were coming to a crèche – from the street it looked just like every other shop front running along the ground floor of the 1970s concrete and glass apartment block. That was what the architect had intended it for, until it became vacant. Members of the growing movement for *crèches parentales* saw it as the site for another initiative.

The telltale sign of a crèche is the line of pushchairs and buggies just inside the door. Once a shop, it is now home during the day for up to 16 young children, with one full time member of staff, supported by a rota of parent helpers. The first impression is of plenty of space and creative use of play spaces to construct an environment that is both exciting and secure for young children.

Much of the main room is given over to a large purpose-built play structure, which children can climb on, slide down and tunnel through. But the space isn't all for noisy and rumbustious play. Through a low partition there is a quiet area, with mattresses on the floor. One minute a father (volunteer helper) is sharing a story book with two toddlers; a few minutes later, a mother has five or six children gathered around, entranced as she sings and plays her guitar. There are plenty of manufactured games and toys freely available for the children and their helpers.

The one big disadvantage of this crèche – according to the full time worker – is that it has no outside play space. This is a very densely populated area of north east Paris, so each day a group of older children are kitted-out in coats and shoes to take a walk, or be taken by pushchair along the busy streets or along the nearby canal.

The bathroom is a feature of this crèche. It is no ordinary arrangement of basins and toilets. There is a whole bathing area, sculpted out of fibreglass, where a small number of children can strip off and play in and with the water. One of the babies is ready for a nappy change, so he is taken to the changing area by the same father who had been reading a story a half an hour previously. The involvement of fathers is a feature of *crèches parentales*.

The families using the crèche live mainly in the apartments above, or within walking distance of the crèche. As parents arrive to take their children home, there are lots of hugs and talk. The atmosphere is very informal. Parents wander into the playroom, the kitchen, and the bathroom in search of their little ones. One even lingers for a coffee. This is the moment when the contrast with a conventional nursery is most clear – these parents are chatting with the 'staff' as if they are old friends, but then they are old friends, or if not, at least there are no status or professional barriers that might distance them.

There are two more *crèche parentale* within a few miles of this one. They are all different, but all using premises that have been adapted and all locally managed by parents themselves. The one thing they have in common is the enthusiasm to provide a child care system, by parents and for parents.

Overview of the local study in France

The study in France focused on the implications of involving parents in the quality of their children's experience, and especially in their intellectual development. The investigators' starting point was a theoretical perspective which argues that children's development is a social process – that young children depend on their immediate care givers not only for emotional security and social relationship, but also for informal pedagogical interactions through which they construct their understanding of the social and physical environment (Vygotsky 1978; Bruner 1983). They were interested in the way young children's exploration of their immediate environment is shaped by their care givers, in the choices and opportunities they provide, and in the way they support, structure, and comment on the children's actions and communications.

This theoretical perspective was applied to *crèches parentales*. Interactions between adults and children were video-recorded and then submitted to a complex multi-dimensional coding system. Forty-four hours of recordings made in four crèches became the raw data for analysis in three main dimensions: the complexity of interactions; the meanings expressed through interaction; and the adult's use of strategies to guide ('scaffold') their children's learning in a way which was sensitive to their developmental level ('zone of proximal development').

The study of *crèches parentales* illustrates the possibilities for bridging the gulf between the micro-systems of crèche and home, institutional and familial care, and professional and parental care giving. *Crèches parentales* can transform the generally cursory 'doorstep' contacts between parents and care givers into a much more genuine collaborative partnership. The authors seek to demonstrate the unique role that parents can play in the crèche environment. Because they are not preoccupied with overall group management (which tends to be the role of the professional), they are able to give more close, individual, informal attention to the children. Their 'novice status' can be a positive advantage, in that they become more truly engaged with the child in a shared exploration of novel situations or activities. This was confirmed in comparisons made between parents and professionals working in the crèche (Tijus *et al* 1995).

The involvement of fathers as care givers is another unique feature of *crèches parentales*. In a context of family instability, divorce and single parenting, the availability of male role models, and male caring styles can extend children's experience, especially in view of

the evidence from this and other studies of a tendency for fathers to adopt a different style of relationship and interaction compared to mothers (Tijus *et al* 1995, Evans 1995). The authors conclude:

> Parental participation mediates the relation between social or ethnic membership and the level of cognitive interaction. In other words, when parents of economically and socially disadvantaged milieus are present and involved in the daily educational activities of the parent-run day care center, they participate, and get the children to participate, in more complex cognitive interactions. This result suggests that it is possible to modify the relationship between the social disadvantage of children and the quality of their experiences of cognitive interactions in Day Care Centers (Tijus *et al* 1995).

Chapter 3

A Framework for Quality Development

The four local studies illustrate the diversity of starting points for addressing questions about quality. How can quality be identified, and by whom? What criteria should be taken into account? Which are the most important – and which make for real quality? These questions have to be asked at every level: by the individuals working in the day care home, crèche or nursery; by programme managers, inspectors and trainers; by regional and national policy planners and advisers; by international agencies, field workers and researchers. The wider the range of contexts, the more difficult it is to reach definitive answers. It is useful to begin by asking how quality issues can be addressed for a particular early childhood programme.

Perspectives on quality

Any early childhood programme is a complex human system involving numerous individuals and interest groups. There are many different potential criteria of quality, which are closely linked to beliefs about goals and functions. These beliefs are in turn shaped by perspectives on childhood, by cultural patterns and personal values as well as by social structures, levels of poverty and wealth, and so on. Instead of expecting to identify universal, objective indicators of quality, we have to look towards a policy framework that can encompass multiple perspectives, multiple beneficiaries and multiple benefits:

> Quality is a subjective and dynamic judgement that entails negotiation between different stakeholders' perspectives which change over time; rather than being prescriptive, quality standards should be established within each context to respond to real needs of parents and children (Bernard van Leer Report of the Paris Workshop, 1995).

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Box 5

Examples of quality indicators

Quality indicators are often grouped under three broad headings:

Input indicators reflect the enduring features of the programme. They are most easy to define and measure, and are often the basis for setting regulations about basic quality standards. Some of these might include:

- **the building and surroundings** (space per child, heating/lighting, toilet/washing facilities, etc.);
- **materials and equipment** (furniture, play equipment, teaching/learning materials, audio-visual equipment, etc.);
- **staffing** (qualifications, basic training, pay and conditions, child-adult ratios, etc.).

Process indicators reflect what actually happens from day-to-day. They are more difficult to pin down and standardise, although some systematic procedures have been developed. Some of these might include:

- **style of care** (adults' availability to the children, responsiveness, consistency etc.);
- **experience of children** (variety, how experience is organised, choices available to children, patterns of activity, eating, resting, play, etc.);
- **approach to teaching and learning** (control/support of children's activities, task demands, sensitivity to individual differences, etc.);
- **approach to control and discipline**, (boundary setting, rules, group management, discipline strategies, etc.);
- **relationships among adults** (day-to-day communication, co-operation, etc.);
- **relationships between parents, care givers and others** (handover/greeting arrangements, opportunities for communication about the child, mutual respect, co-operation, acknowledgment of differences, etc.).

Outcome indicators are about the impact of the provision or the experience. This is the domain of interest in 'effectiveness' or 'cost-benefit'. They might include:

- **children's health** (growth monitoring, records of illness, etc.);
- **children's abilities** (motor coordination, cognitive and language, social relationships, early numeracy and literacy, etc.);
- **children's adjustment to school** (transition difficulties, progress through grades, school achievement, etc.);
- **family attitudes** (support for children's learning, parental competencies, etc.).

The following framework is offered as a starting point for this process of negotiation. It is based on asking three key questions:

1. Who are stakeholders in the 'quality' of a programme?

There are numerous different stakeholders in any early childhood programme, each with their own perspective on quality based on their interests, their roles, and their power to influence its design and functioning. For example, there are programme managers, teachers, parents, community leaders, employers, child development experts, politicians, funding agencies, research investigators, and above all, the children themselves.

2. Who are the perceived beneficiaries from 'quality'?

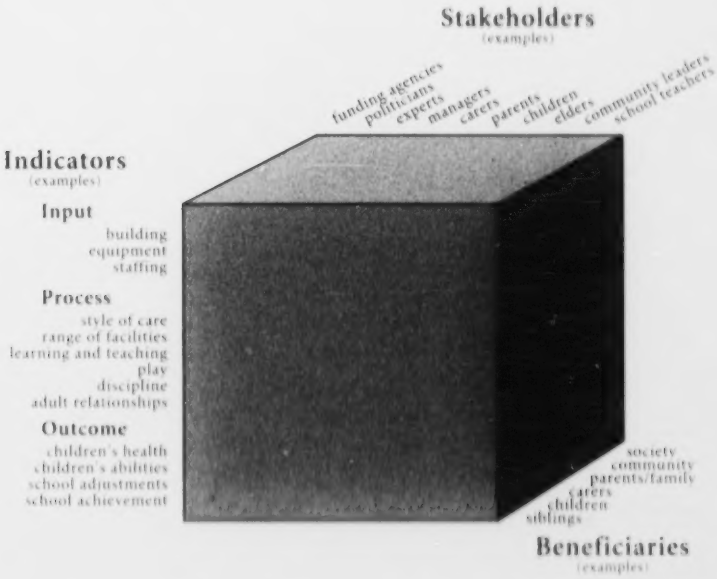
The obvious answer is that the children are, but many stakeholders would include parents as beneficiaries; there are also less explicitly identified beneficiaries, such as employers who gain from parents' availability for work; the teachers in the primary school who receive children better prepared for instruction; the early childhood care workers who receive financial rewards and status from their work; and the community leaders who gain prestige. For some parents and communities, older children are seen as major beneficiaries, because they no longer have to care for their youngest siblings.

3. What are taken to be indicators of 'quality'?

Judgements about quality are closely linked to goals and expectations for the programme in particular, and childhood in general. They can focus on basic standards of physical care and nurturance; resources for play activities and learning; the character of adult-child relationships (intimacy, formality, approach to discipline, style of teaching, and the like), and care worker/parent relationships; the flexibility of the programme to suit parents' working patterns; the children's adjustment to and achievement in school; calculations of cost effectiveness, etc.

These three questions: 'Who are the stakeholders?', 'Who are the beneficiaries?, and 'What are indicators of quality?', can be seen as three dimensional, visually represented as a cube in Figure 3.

Figure 3. Three dimensions for examining the quality of early childhood programmes



This framework can accommodate diverse views on quality. For example, each of the following hypothetical statements can be seen as occupying a particular space within the cube:

- *It's a good programme because my child is safe and she gets a good meal each day. Before they set up the crèche I had to leave my older children at home to look after the little one. Now the older ones can go to school and I can go out to work with peace of mind. My only worry is that she may pick up some bad habits from the other children.*

  This is a parents' perspective, seeing their pre-school child, their older children and themselves as beneficiaries, concentrating on happiness, social relationships and parental employment as indicators.

- *It's a good programme because we have now got coverage of 75 per cent of the children. Using care workers from the neighbourhood has helped integrate the programme into the community. Although their training is very brief, they have become quite well-respected as a source of advice to parents. At the same time the costs are low and there are signs of improved mortality statistics as a result of the nutrition component.*

  This is a politician's view. Beneficiaries are seen not only as individuals but communities and society in general. The concern is with numbers in the programme, cost effectiveness, and global indicators of quality.

- *It's a good programme because we are able to prepare children for school. They learn their letters and numbers, as well as songs and rhymes. At the same time they learn to take instructions from their teachers which they will need at school. The big problem is that we don't have enough books to go around.*

  This is a care worker's perspective, concentrating on children alone as the beneficiaries, and concerned with the pressures on staff and the adequacy of the materials and resources to achieve child development aims.

- *It's a good programme because I get to be with my friends. Sometimes it feels like a long time to be in the classroom and I get bored keeping still when we are meant to have our rest after lunch.*

  This is a child's view, reflecting their own experience of the programme, with views on what they like and dislike.

How can this model be used? The model is intended as the starting-point for appraising a programme and negotiating its development with all those stakeholders who are interested and involved with it. It is easy for people running a programme to be 'locked inside' their own perspective. As Lilian Katz has pointed out, trying to adopt the perspective of those participating in early childhood development programmes is a healthy antidote to the *top-down* perspective adopted by those having management responsibility for such programmes (Katz 1992). Taking account of other perspectives can provide a more complete programme appraisal. It is an 'inclusionary model' (Moss and Pence, 1995) which discourages narrow prescriptions about what makes for a good programme, which goals are worth pursuing, and which criteria should be taken as indicators.

Figure 3 places various interest groups side-by-side as if on an equal footing as stakeholders in an early childhood programme. In practice, of course, these groups are not equal. Identifying stakeholders' perspectives means becoming much more explicit about the power relationships that shape an early childhood programme. What is the management structure? Who is holding the purse-strings? Who are the experts? What is the parents' role? Do children have a voice?

Recognising inequalities of influence over what is defined as good quality is an important first step in empowering stakeholders whose voice might not otherwise be heard, or listened to. At the same time, identifying stakeholders' perspectives and negotiating quality is not necessarily about even-handed processes of democratic exchange in the ways that the concept of 'negotiation' implies. It is not merely about blending perspectives into an artificial consensus. It is rather more about acknowledging how a range of beliefs and values may shape the ecology of children's development, and the experience of an early childhood programme. Inherent conflict in beliefs and practices are common; for example, different quality standards may apply at home than in the programme. There may be a persuasive argument about the inappropriateness of one view of quality compared with another, especially when circumstances are changing.

Defining 'quality' in an early childhood programme is not a once-and-for-all process. Negotiation and renegotiation are continuous. An important feature of this process is that stakeholders become more aware of their own (and others') partiality, more aware of the personal, cultural, institutional and hierarchical constraints on the perspectives adopted, and thereby more open to the possibility of change.

Identifying the multiple perspectives of stakeholders in the day care programme was a major theme of the Venezuelan study. Box 6 illustrates some of the findings; further examples are also presented as Box 12.

Box 6

Multiple perspectives – an example from Venezuela

As explained in chapter 2, the official goals of the *Programa Hogares de Cuidao Diario* (day care homes programme) have shifted. During the first 15 years of operation (1974-1989), the programme was administered within the context of economic policies promoting full employment, and was accompanied by a national policy to provide community-based day care for the children of low income working mothers for up to 12 hours a day. In 1989, at the time of massive extension of the programme, the principal goals were re-oriented to become more explicitly compensatory, in terms of supporting the child care tasks of mothers, and the health, welfare and development of their children.

These policy changes might be expected to reflect in perspectives on quality. In practice, the Venezuelan study found that official changes had not fully permeated the programme. This was strongly indicated by a remark directed to non-working mothers whose children attended the programme:

> '[It] is not so that the mothers can stay home while others take care of their children.'

The study questioned mothers, day care mothers, and organisers *(Promotores)* about the goals and function of the programme. They found quite marked discrepancies in the emphasis placed on mothers versus children as the beneficiaries. Sixty-seven per cent of mothers and 51 per cent of day care mothers saw helping working mothers as the main objective. By contrast only 22 per cent of organisers emphasised the benefits to mothers of being able to go to work without worrying about their children. This was balanced by a much greater emphasis on child-oriented benefits (care, feeding, promoting development), which accounted for 78 per cent of organisers' replies.

Contrasting the perspectives of mothers with day-care mothers is an oversimplification. The programme in Venezuela takes two forms: the smaller home based *hogar* (day care home) and the larger group *multihogar* (multi-day care home). From the local study, it is clear that stakeholder perspectives on quality issues vary between these two forms. For example, when asked about the most important functions of the day care mother, there was a greater emphasis on pedagogic and organisational role among day care mothers in the multi-homes, compared with the more family-organised day care homes where day care mothers' main emphasis was on meeting basic needs and providing overall care.

The different stakeholder perspectives on day care were also revealed in questions about how children spend their time in the programme, and what activities they engage in. Mothers emphasised mainly basic care and play, while day care mothers emphasised developmental and educational activities: language, drawing, puzzles, etc. Clearly these differences reflect the different experiences of the two groups, and the fact that the care givers have undergone a basic training which would emphasise child development goals. Although these are only perceptions of the activities offered, they do suggest discrepancies in perspective on quality; this is not helped by the fairly superficial level of mainly 'doorstep' exchanges between mothers and day care mothers. As the authors note:

> According to the mothers, their children ... engage basically in sleeping, eating, bathing and playing. They do not seem to have detailed information concerning what their children do during the day in the programme. Although this is congruent with their perspective of quality, which is centred on care and nutrition, it is necessary to establish a closer relationship of the mothers with the day care home/multi-home, since the mothers can complement or share with their children the learning experiences they engage in, which would increase the programme's quality. (Teran de Ruesta et al 1995)

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Making perspectives explicit and negotiating a shared understanding, especially between professionals, parents and community, will reflect well on the effectiveness of a programme. In terms of Bronfenbrenner's ecological model, establishing a stronger relationship between the two most important micro-systems will produce a more effective environment for human development at the level of the meso-system (Bronfenbrenner 1989). This does not necessarily mean stakeholders converging on an identical view of child care and education; what matters is complementary understanding.

The model presented so far assumes that while there may be differences in perspective between stakeholder groups, there is consistency within these groups. Often this is not the case; for example when different professional/para-professional groups work side-by-side, different management agencies share responsibility for the programme, or where the programme serves a heterogeneous population, with competing perspectives on goals, values and practices for early childhood. Indeed, the inherent conflicts and tensions within any pre-school system are part of the dynamic enabling stakeholders to move forward, to negotiate change, and to tolerate diversity in expectations of quality even within a programme.

Sometimes the problem may seem quite the opposite. There may not appear to be any competing perspectives, nor any potential for dynamic negotiation of quality. The practices within an early childhood programme may be fixed within a particular mould, dictated by a powerful interest group, adhering to a very rigid view of the requirements of childhood, resistant to change, or even to the idea of monitoring quality, with parents passively acquiescent. Identification of this as a 'problem' will very often originate from someone with an outside perspective, for example, from a community development worker, an early childhood consultant or researcher, or an agent of change whose role is to mobilise local resources. In this case, the task may be to challenge dominant or parochial perspectives, facilitate and empower dormant interest groups, by raising or modifying their expectations for child development programmes (Paz 1990).

Of course, the multiplicity of perspectives does not apply to programme management only; questions of quality apply at all levels, and so does articulation, dialogue and negotiation of perspectives: at classroom level, through parent-professional meetings, home visits, statements of goals, plans and progress; at community level through debate among stakeholders, training for programme workers in mediating perspectives; at national level

through public discussion, information about alternative approaches; and ultimately at an international level, through research, discussion and declaration of fundamental universal principles.

The same underlying questions apply to all levels. In the face of competing perspectives, how can progress be made in the process of quality development? If quality criteria are to be negotiated, what standards should be applied to a particular perspective or to assessing the merits of one particular perspective over another? Are there any universal yardsticks (or metre rules)?

Relative but not arbitrary

Treating quality criteria as being relative rather than fixed, negotiated rather than prescribed, might be interpreted as undermining programme managers, whose role is already difficult. If there are multiple perspectives on quality, are all attempts to identify objective criteria illusory? Is seeking agreement about quality as illusory as seeking a crock of gold at the end of the rainbow? If no objective certainty exists about quality, is the search for any kind of common framework a pointless exercise? Is quality purely 'subjective'? Is the enterprise doomed to flounder in a sea of relativity?

The usual response is to seek certainty in expert knowledge. For example, child development experts should be in a good position to say what the needs of children are, which practices are developmentally appropriate, what will most enhance their learning. Pragmatically, this may well be the case, but at a deeper level, identifying the basis for expert judgments raises controversial issues. These have been debated by Kagitcibasi (1996). Accumulating evidence from cross-cultural studies of child development highlights the relationships between child care systems and child development outcomes, but the experts carrying out the research typically stop short of judging the relative merits of one system over another, because this would entail value judgements. Kagitcibasi argues that this kind of relativism is unhelpful to the quest for healthy human development, and creates a dangerous double standard:

> By not using comparative standards and not passing judgements about the state of the children in pre-industrial traditional society, ironically a value judgement is being made by default. Expressed rather bluntly, this value judgement states that in the industrial society with mass schooling (universal) cognitive standards of achievement apply, but in the pre-industrial society they do not (Kagitcibasi 1995).

My position is rather different. I believe that when experts use concepts of 'psychological health' and apply 'comparative standards', this inevitably entails making value judgments, and we should not pretend otherwise. Making these value judgements explicit is essential for making progress towards achieving a sound basis for prescribing for the welfare/education of the world's children. Relativism must be the starting point for debate; otherwise it is too easy to become trapped into assuming that it is inevitable for dominant standards to become the universal standard. They *may* become the universal standard, if globalisation continues. But if they do, it should be by virtue of consent, by choice, and not because experts have proclaimed that this is *necessarily* the best way forward.

Relativism is the beginning of the story, but it is by no means the end of it. Judgements have to be made, criteria have to be applied, standards have to be agreed. Although there are multiple perspectives, this does not mean that quality itself is arbitrary, that criteria for quality in early childhood are a matter of whim or personal taste. Judgements of quality are the expression of complex systems of belief, knowledge and values, relating to particular cultural, familial and institutional contexts and aspirations for childhood. To counterbalance the tendency to impose so-called 'universal' standards, I shall argue that appraisal of context and perspectives within a particular setting is an all-important part of the process of identifying quality.

To elaborate the rainbow metaphor, while rejecting the idea of a 'crock of gold', we should not lose sight of the rainbow itself; the experience of the rainbow is real enough. Just as rainbows require both sunshine and rain, there are important prerequisites for quality in early childhood. But like rainbows, that quality is not fixed and can be elusive. Whether and where a person sees the rainbow depends on where he or she is standing. In other words, although perspective is all important to perceptions of quality, it is not the only consideration. There are other important constituents of quality which will be reviewed in subsequent chapters. I shall argue that some of these constituents are often presented as if they were the basis for setting *universal, objective* criteria. I reject this view. None is in itself sufficient to provide a common framework, but each can constitute a step on the journey towards defining quality.

Chapter 4

Resources for quality

Most discussions of quality start with input indicators, notably the building, the equipment and the staffing available to a programme. The contrasts in availability of these material and human resources is one of the striking features revealed by the local studies, summarised in Chapter 2. In the face of these contrasts, one approach to quality would concentrate on specifying basic international standards able to be applied universally to all children. Although superficially attractive, I shall argue that this approach is neither realistic nor productive. I reject universalism. However, I do not reject the need for quality standards. Their establishment is fundamental to quality development for any programme and setting. I propose a contextual approach to identifying basic quality indicators, within the framework of multiple negotiations outlined in Chapter 3.

Whose basic standards?

What would be the consequence of adopting a universal approach to 'basic standards'? Input indicators considered grossly inadequate in one context or country, are an unattainable luxury in many others. For example, some programmes operate with child-staff ratios of 3 to 1, others 12 to 1, others are sustained with 25 to 1, 40 to 1, or even more. Where should the standard lie?

The same dilemma applies to material resources. While some programmes are blessed with an indulgent wealth of manufactured games and equipment (furniture, domestic appliances, TV, video, computers, toys, puzzles, paper, paints, books, etc.), most make do with minimal resources, and many with virtually nothing at all. While most programme planners try to ensure that children's stomachs are filled, others are preoccupied with extending children's minds by access to the high-tech world of computers, CD-ROMs and the Internet. What is the 'basic standard' here?

Where Majority World programmes do possess a few toys and games, they are not necessarily made available to the children – they are far too precious to risk being damaged by clumsy fingers. Such possessions are unavailable to the children in an environment where manufactured goods are equally unavailable to their parents. Owning a new cooking pot might be a more realistic family aspiration.

Box 7

Play space and social behaviour – a study in South Africa

One basic indicator of quality is the amount of play space available to children within a nursery building. Regulations about minimum density are widely applied in Europe and North America, and there is research to demonstrate the importance of this feature of early childhood environments. For example, in the UK, Smith and Connolly (1980) identified a threshold of between 1.5 and 2.0 square metres per child, below which, increased crowding adversely affected children's play and social behaviour. From this research, we might take 1.5 square metres per child as a basic standard that can be widely applied.

How well would this indicator of 'overcrowding' translate to other settings? Liddell and Kruger (1987, 1989) made a study of children's social behaviour in a day nursery within an urban township in South Africa. Children attending the nursery were growing up in densely populated circumstances, typically in large households with an average of 4 square metres of space per person. The nursery itself was equally densely populated with an average of 60 children in one classroom, cared for by two staff. In order to assess the impact of crowding in this context, Liddell and Kruger took advantage of the regular fluctuations in attendance. On some days, social density was as little as 0.56 square metres, while on other days it rose to 1.56 square metres. The children were observed during free play sessions over a twelve-week period, and their behaviour coded on categories covering social participation, activity and aggressive behaviour.

This South African study supports the British research finding that higher levels of social density were associated with a decrease in 'cooperative' social participation and 'socially mediated activity', and an increase in 'unoccupied behaviour'. But there is an important difference. The lowest (most optimal) density levels observed by Liddell and Kruger were equivalent to the highest, (least acceptable) density levels in other contexts. In other words, children were functioning effectively in the South African township nursery in conditions that produced adverse reactions among British children. The implication is that social density affects children's behaviour and relationships, but those effects are relative, not absolute. What is it they are relative to?

Although children's familiarity with high density living within the townships maybe a contributory factor, a follow-up study by Liddell and Kruger (1989) suggests this is only part of the story. Children's ability to cope may also be mediated by the attitude of care givers who work in high density child care, who have themselves developed coping strategies. In other words, overcrowding is about the meaning attributed to a situation, defined individually, socially and culturally.

The authors draw the following conclusion for policy:

> As for improving facilities for township pre-schoolers and children in other cultures where overcrowded day care facilities prevail, questions may be raised as to whether reductions in density merit high priority. The present study suggests that, at least in the short term, the effects of severe crowding may be less extreme than would have been anticipated (Liddell and Kruger 1987).

On these indicators alone, most of the world's children are attending programmes that fail to fulfil the basic standards expected by programme planners in the Minority World. If their perceptions of basic standards were to be universally applied, the logical outcome would be to condemn the experience of the majority of the world's children.

Targeting higher levels of resource for early childhood programmes is highly desirable. But a concept of basic resource standards for early childhood would ultimately only make sense within a wider framework for tackling gross economic and social inequality, especially as it affects women and children, within as well as between countries. Early childhood programmes are a ripple (albeit a very determined ripple) against a tidal wave of inequality.

The idea of a universal set of basic standards is not just unrealistic. In some cases it may be inappropriate and unhelpful to the progress of early child development programmes (see Box 7). 'Identifying basic standards' is too often a euphemism for adopting the quality indicators that preoccupy programme managers in the Minority World: materially affluent, industrialised, urban societies where professionalised employment patterns combine with materialist, individualist, and technological values. At the same time, the economic, social and community resources in Majority World contexts are so different as to suggest that there may be other ways of thinking about quality standards. Unfortunately, these are unlikely to be cultivated while expectations are adhered to that equate human resources with highly-paid professionals and material resources with manufactured products.

Reluctance to depart from these resource expectations is understandable. To do so might unwittingly legitimise official complacency about inequalities. Relativism can appear to condescend to the poor and to undermine the struggle for social justice. But aligning universalism with egalitarianism, and relativism with a *laissez-faire* philosophy, is a gross oversimplification. Advocacy for enhanced resourcing is possible *at the same time as* negotiated, contextually-sensitive standard-setting.

From the perspective of Kenyan society, Gakuru highlights the benefits of a negotiated approach:

> First, the process of negotiation among stakeholders would promote democratic values and practices by challenging the pervasive dependence embedded in the culture of sponsored development. Secondly, it would generate and harness energy and resources both from internal and external sources, for the common good (Gakuru, 1995).

What is needed is an open-ended, positive and progressive approach to quality development which does not merely emulate the quality standards of affluent nations, but instead legitimises locally available human and material resources for child development in ways that are ecologically sustainable and sensitive to local aspirations. To borrow the title of a Bernard van Leer Foundation report on early childhood in Africa, the alternative is to 'build on people's strengths' (Bernard van Leer Foundation, 1994).

Resources versus resourcefulness

Because the building is a major cost of any programme, there is a danger of disproportionate attention and resources being concentrated on this. While the building tangibly symbolises the programme, and provides a secure context for child development activity, the building is not the same thing as the programme:

> Contrary to some views, 'centres' do not have to be purpose-built: they can be in people's homes, under a tree, in borrowed premises, such as church, clinic or other community facility. As long as the environment is safe, its location is immaterial (Bernard van Leer Foundation 1994).

The same principle applies to programme staffing. While talented, well-trained and well-supported care workers and teachers are fundamental to the quality of many programmes, professionally trained personnel are but one human resource. Less visible human community resources, such as family and community members, patterns of social organisation and cultural cohesion are ultimately what governs children's experience:

> The mobilisation of dormant or under-used resources – the goodwill of communities, the time of elders, or the knowledge, expertise and resources of private sector companies – could have an enormous impact on an ECD programme. In fact people themselves are often the most underutilised resource (Bernard van Leer Foundation 1994).

Material artefacts have become a hallmark of 'high quality' early childhood environments in materially affluent societies. The design of early childhood centres has been strongly shaped by urban contexts where children were denied access to the natural environment, recreated for them in the child-centred 'kindergarten'. The relevance of these materials in other contexts cannot be assumed, nor can, the necessity of much manufactured equipment, much of which can in any case be improvised. At the

same time, most communities and cultures are a rich resource for learning (in terms of the natural environment, craft skills, oral traditions, music, dance, story-telling) which can be harnessed in support of children's learning.

The implication for local programme planning is that words like 'low cost' and 'low resource' lose their meaning, or rather, become more meaningful in a different way. Programmes that might be judged as 'low resource' in materially affluent nations may in fact be 'high resource' in a local context. Likewise, some on-the-face-of-it 'high resource' programmes in affluent contexts might more appropriately be re-labelled 'low resource', in terms of community endowment.

Thus ensuring a 'basic standard' of care is a relative, and not an absolute judgement. It is relative in the sense of enhancing, or offering experiences complementary to children's family and community environment. In one context, it may be about providing germ-free drinking water for children in an environment where parents cannot afford the fuel to boil water themselves. In another context, it may be about providing stable, consistent care giving in an environment where family instability threatens children's emotional security. Assessing the resources of children's total environment is the starting point for quality development in an early childhood programme. It cannot be judged without reflecting all the contexts that shape children's experience. No matter how well resourced in terms of 'basic standards', an organised programme only has quality in so far it relates to, and is relevant to the wider context of children's lives.

Box 8

Resources for quality – the crèche and home environment in Tamil Nadu

The investigators in Tamil Nadu visited the homes of 440 children (aged 3 to 4) attending the 44 crèches. Many of the communities are described as 'blighted', with narrow, unpaved streets and inadequate drains, sewage and refuse disposal.

While some children lived in 'modern' brick/concrete houses, 65 per cent lived in traditionally constructed homes (a bamboo frame, infilled with mud and/or matted palm leaves, with a roof made of palm leaves or corrugated metal). In the cities, most families did not have their own toilet, so children were learning to use Corporation public conveniences and collect water via a public tap. Most homes had access to electricity and televisions are highly sought after, but there were very few other material possessions – a few pieces of simple furniture, basic cooking utensils, and so on.

When asked how they provided for their children, the parents stated that their priorities were food, and the cost of any medical care. They also emphasised giving time to their children especially for social and moral training – about honesty, obedience to elders, sharing and cooperation. The investigators' observed that these were affectionate homes, where mothers were responsive to their children and comfort was offered in distress. Older women in the community continued to be the main source of advice on how to care for children. They were also an important source of practical child care: 83 per cent of mothers relied on their mothers-in-law to look after their little ones. These informal child care networks affect perceptions of the crèche. When asked why they send their children to the crèche, mothers emphasised their children's educational development (78 per cent) much more than child care (24 per cent) or the midday meal (24 per cent).

Against this background, it becomes more possible to assess the qualities in the environment offered by the crèche. First, by contrast with the children's homes, 73 per cent of crèches are built of bricks/concrete. Eighty-four per cent have a solid floor (of concrete, stone etc). Most of the urban crèches have a toilet and water supply, although the authors note that children are not always allowed to use the toilets for fear they will soil them.

Second, while the children's mothers were mostly under 30 years old and had received little schooling themselves (37 per cent were illiterate), the crèche workers were an older age group, with much higher educational achievement: 60 per cent had completed 12 years schooling. They had also completed the specialist, full-time, one-year Bala Sevika Training which is provided by the Indian Council for Child Welfare.

Third, for the child who has little experience of play materials, the crèche may provide some very simple activities, building blocks, puzzles, bead-threading, etc., although these will have to be shared with all the other children. From the perspective of the Tamil Nadu study authors, 80 per cent of the crèches were judged to have play equipment that was poor and insufficient. However the shortage of equipment is not a major issue for those most closely involved. From the mothers' point of view, this is a quality programme. Ninety per cent stated that the crèche fulfilled their expectations. (Paul 1995a)

A contextual view of quality

A holistic/contextual view of quality is fundamental to this report. It applies not only to resourcing, but also to curriculum, staff training and even research and evaluation, as subsequent chapters will make clear. The short history of early child development programmes has been marked by a strong tendency to treat both children's development and the programmes they attend as distinct domains, capable of being separated from other areas of human society, relationships and influence, as well as from other stages of

life. In part the concepts themselves, 'child development' and 'early childhood programme', reinforce these tendencies, offering superficial coherence, but drawing attention away from the underlying dynamic, variable, and interconnected social processes.

Physically, a child is a distinct entity, but psychologically a child's development is embedded in a network of relationships and contexts for growth, of which the early childhood programme is but one (Woodhead *et al* 1991). The case has been made many times over for designing early childhood programmes to complement and support family/community care giving, co-operating fully with parents, with the goal of enhancing quality in all aspects of children's development, not just within the confines of the programme. In practice, this goal is rarely achieved.

While there are strong grounds for taking a positive, contextual and holistic approach, there is no escaping the impact of resource issues for children's development. They both create opportunities and constrain what can be achieved within a programme and within a community. An adult working with ratios of 5:1 or less (whether through staffing policies or community involvement), can make choices whether to work with individuals, small groups or the whole group. A more intimate, receptive style can be adopted with individuals, and a more formal style with a whole group. Either way modifies children's experiences, and the possibilities for learning and relationship. By contrast, an adult working with ratios of 25:1 (or more) has no such choices, and must restrict her range of styles of working with the children, modifying their experience and the possibilities for learning. The same applies to material and cultural resources for teaching, and for supporting children's play and learning. The programme with diverse resources (whether through generous funding or community resourcefulness) has the possibility for offering a broad curriculum of teaching/learning experiences. The programme that has no such resources, or fails to utilise resources, must rely on the imaginative and supervisory powers of an adult, and on the compliant obedience of the children to sustain a minimal repertoire, typically of movement games, singing, number work, and so on.

So the rejection of universal basic standards in favour of a more relative, contextual approach still leaves an underlying issue. Can a point be defined when the resources available to a child care programme are so low that quality cannot be sustained, by any standards? In other words, is there a bottom line, and how can it be defined? Or, as Gakuru (1995) put it, what about children who are living 'in the shadow of the rainbow? One approach is to judge whether a programme is able to meet children's fundamental needs and rights.

Chapter 5

Quality, children's needs and children's rights

At first sight, trying to establish children's universal basic needs seems the most promising way of defining quality. After all, 'Children are children and their needs are the same the world over'. Or are they? Are the needs of children the same in rural Kenya as in urban France? An affirmative answer raises the tantalising prospect of being able to specify a common set of quality indicators to which even the least well-resourced programmes can aspire. We might even be able to specify minimum child-adult ratios, or a minimum curriculum of play and learning experiences. Box 9 suggests that the picture is far more complicated; 'needs' are locally contextualised and perceived.

Beliefs about quality are very frequently presented as about whether a child care environment 'meets children's needs'. This appears to be a straightforward concept. In fact, it is far from straightforward and has served more to confuse than to clarify the basis for quality development. The reason for child care experts being so attached to this way of thinking about children is that 'needs' appear to be a quality of the child; objective, observable and measurable. Expert statements about children's intrinsic needs are more authoritative than judgements about what is good for them. In fact, many statements of need involve projection onto children of adult judgements about goals and values (the child's 'best interests') and how these goals can best be achieved; they are socially constructed (Woodhead 1990).

If this concept is to be used as a criterion for judging quality, it is essential to distinguish the very different meanings of 'children's needs'. One way is to think in terms of a spectrum of needs. At one end of the spectrum are 'basic' or 'fundamental' needs with biological roots, which can be used to assess the quality of any early childhood environment. These needs can be universally agreed upon. They are identifiable in the drives and wants of children and involve physical survival and psychological health.

Box 9

Towards a shared view of children's needs – an example from Tamil Nadu

The study in Tamil Nadu illustrates the gulf that can exist in perspectives on children's needs, their care and treatment. The investigators organised group discussions with the older women in each locality who were judged to be mediators of cultural beliefs and values about children's needs; they advised mothers and scolded any who they believed to be neglecting their infant. These women's comments illustrate the continuing tension between 'traditional' and 'modern' practices. For example, primary health care is available to all the neighbourhoods, but there is only minimal understanding of Western medicine. Immunisation is more or less routine, yet 46 per cent of mothers had very little appreciation of its purpose:

> The women do not know what the shots are for, they just obey the doctors' instructions. The baby is just taken away by the nurse and brought back after the shot and the mother is no wiser as to what happened (Paul 1995).

At the same time, mothers continue to think about children's health needs in very different ways. They may use herbal medicine, magical cures, propitiation of the gods and tying of a talisman to ward off evil spirits. The older women made clear their unfamiliarity with medical explanations (bacteria, viruses, infections, etc.) and their continuing suspicion of mothers taking sick children to the doctor rather than relying on more traditional explanations and remedies, notably indigenous Siddha medicine.

In fulfilment of the goals of community development and parent education, 72 per cent of crèche workers reported organizing regular monthly meetings with mothers. However the attitude of the crèche workers towards the beliefs and practices of mothers was largely negative. For example, 59 per cent admitted that 'they did not give much value to the ideas expressed by the mothers' and 54 per cent said 'they never involved the parents in planning for the well-being of the child'. In the same vein, only 36 per cent of the crèche workers made visits to the children's homes (Paul 1995a). The investigators argue that because of the 'superior' attitude of the crèche worker towards the community in which she works, a gulf is maintained between community perceptions of children's needs and children's actual crèche experience. For example:

> Being exposed and conditioned to the unhygienic practices that most members of the community are used to, the child also is bound to accept these habits as the norm. Moreover, whatever attempts are made by the NGOs through their interventions to educate the child about healthy habits and patterns, may be negated by the practices that the child observes around him/her in the family and in the community (Paul 1995a).

At the other end of the spectrum are 'socially constructed' needs (or what Evans and Myers [1994] call 'contextual' needs). Situation-specific, these needs are as much about the culture and society into which the child is growing as they are about the child. Socially constructed needs are culturally relative. They are 'in children's best interests', and may have nothing to do with what the child wants. They involve social adaptation, achieving goals, and acquiring desired skills and values.

Some biological needs are incontestable; children need nourishment, shelter, and protection or else they will not survive. These needs are in some sense 'built-in' at birth. Meeting basic nutrition needs has been a priority goal in the Tamil Nadu crèches and in the day care homes in Venezuela. Having achieved considerable success in meeting these basic needs, the programmes are turning their attention to the task of defining children's psychological and educational needs. At this point, the process becomes much more problematic.

Kellmer-Pringle (1975) has argued that there are four fundamental psychological needs, the need for:

- love and affection;
- new experiences;
- praise and recognition;
- responsibility.

Infants are born with a strong inbuilt drive to make close affectional relationships; they are pre-adapted to human contact and communication, and are oriented to positive emotions, seeking praise, and avoiding pain or rejection. The concept of needing 'responsibility' is less certain; but even if we accept that there is some basic infant drive to this human quality, it does not get us very far in constructing a framework for judging quality care. The problem is that 'human nature' does not make precise specifications for children's psychological development. One of the most distinctive features of the species is the relative immaturity of the human infant and the long period of childhood (Bruner 1972). It is human society that structures how children's needs are expressed; and how they are met.

In practice, the most important criterion for judging the quality of children's experience is whether it facilitates their social adjustment within particular patterns of family living, particular patterns of care and education, community and culture. In other words 'needs' are as much about social adaptation as they are about children's nature. Even the most fundamental needs can be met in numerous different ways, and many so-called 'needs' are not fundamental, but are defined by society. So, with the exception of those fundamental needs connected with survival, nutrition, and basic care, the concept of need cannot prescribe particular experiences of childhood as essential in any absolute sense. There are many pathways within the boundaries of psychological adequacy; their appropriateness has to be judged against other criteria than children's needs, notably, available resources, social ecology and aspirations for childhood.

There are other reasons for rejecting unqualified use of the concept of children's needs as a basis for defining the quality of early childhood experiences. First, this is an individualistic approach; it draws attention away from the interdependency of 'needs' in any human system. Perceptions of what children need are often closely related to parents' needs and care workers' needs. Secondly, because needs are usually framed within a protectionist stance, they reinforce a dependency relationship between a powerful provider and a passive receiver.

An alternative framework asserts children's **right** to health, nutrition, education, and so on, as in the United Nations' Convention on the Rights of the Child, 1989. But even this is far from straightforward. Commentators argue that there remains a tension between Articles of the Convention asserting children's autonomy and rights to self-determination, and the key provision of the Convention. This reasserts a protectionist stance in stating that 'the best interests of the child' are a primary consideration; in so doing, this opens the door to the same issues as applied to 'the needs of the child'. Defining 'the best interests of the child' is a matter for cultural interpretation. These recurring dilemmas challenge universal thinking, and reinforce the case for applying concepts like needs and rights in contextually meaningful ways (Alston 1994; Freeman and Veerman 1992; Burman, forthcoming).

In short, statements about children's rights and needs provide important markers for any debate about quality in early childhood programmes. But these markers are neither unproblematic, nor are they fixed. They have to be understood at the level of practice as well as theory. Bridges must be built between the rhetoric of general principles and the reality of diverse experiences. They have to be interpreted in political, economic, social, religious and cultural contexts. At the same time, they have to be interpreted in historical context, within individual communities as well as at regional and national levels. This does not mean diluting the power of general principles because general principles have no power unless they can be rendered meaningful in the context of particular, local practices, and are comprehensible to those who have a stake in or influence over those practices. This is not a one way process. In the course of time, the general principles themselves may shift.

International consent about children's fundamental needs and rights may be amended or improved, as new knowledge accumulates, as global circumstances alter, and as social values change. Pragmatically, they define the outer boundaries of any debate about pathways to quality. They are essential constituents in the process of negotiating 'quality' in ways which are relative, but not arbitrary.

Box 10

Gender and children's 'needs' – evidence from the local studies in India and Venezuela

In reports about early childhood, and especially in studies of child development, the 'child' is generally treated as a single category; this fails to acknowledge the very different life prospects, experiences and goals for development that differentiate children according to the context in which they grow up. One of the most pervasive forms of differentiation is between the girl child and the boy child (Burman 1995), explored by the studies in India and Venezuela.

In Venezuela, care givers report that 'boys and girls are generally treated in similar ways'. But there is a tendency towards differential treatment in respect to discipline, play and games, a tendency more pronounced among mothers than day care mothers. Generally, girls are expected to be more passive, to play quieter games with dolls, stuffed animals etc; they are also seen as 'softer' and easier to manage. By contrast, boys are expected to be stronger, more active and rebellious, with more physical games; discipline is accordingly more forceful for boys.

The mothers' gender portrayal is more complex than this. The perceived amenability of the girl child combines with much higher expectations of domestic work and support in looking after younger siblings; and on occasions a much more repressive approach. One mother is quoted as saying: 'To discipline a girl it is necessary to shout, hit her and shame her before others' (Teran de Ruesta et al 1995).

The study in Tamil Nadu illustrates the discrepancy between parents' publicly stated beliefs about gender, and what the authors suspect were their private beliefs and practices. While socialization is described as very much gender-based 'with many more do's and don'ts for the girl than for the boy', around 81 per cent of the 440 mothers interviewed denied that they showed any preference for the boy child. Approximately 68 per cent did acknowledge that boys were allocated different roles in the family, with girls more often confined to the home. The author concludes:

> Discrimination against the girl child in India has become a widely known fact all over the world ... Perhaps the tendency to say what is acceptable, rather than what is the truth, might have been operating in the minds of the respondents. The government is using the state controlled television to communicate pro-girl child messages and it is quite likely that these messages are having an impact on the people, at least at the conceptual level (Paul 1995a).

The early childhood programme is a context in which stereotypes can be challenged through discussion and example, where discriminatory child care practices can be re-evaluated, and where community understanding about children's needs and rights can be redefined.

Chapter 6

Quality, context and developmental appropriateness

> '... no concept is more key to defining quality than "developmental appropriateness"' (Bredekamp 1987)

'Developmental appropriateness' is a widely used criterion for identifying quality in care arrangements for young children, assessing the ways their play and learning is promoted, and the approach to teaching adopted by care givers. 'Developmental appropriateness' draws attention to the distinctive features of children's emotional, social and cognitive functioning associated with their age and the developmental stage. But there are serious dangers in overgeneralising the concept.

As for 'children's needs', I shall argue that supposedly decontextualised, universal views of developmental appropriateness are in fact a product of particular child-rearing contexts. I shall propose a complementary concept: 'contextual appropriateness' which, when combined with 'developmental appropriateness', emerges as the principle of 'Practice appropriate to the context of early development' (PACED).

The concept of 'developmental appropriateness' is built on theories and research in child development. The volume of work in this field has grown exponentially since G. Stanley Hall initiated the Child Study Movement in the USA a century ago. The resultant knowledge appears to offer a powerful frame of reference for defining quality experiences for early childhood. If we know how children develop, we can identify the kinds of experience which will and will not help foster that development. At a local, pragmatic level this is true, but if the principle becomes generalised too widely, there are dangers: on what basis do psychologists and educators assert that one kind of experience is more developmentally appropriate, more valuable, and better than another?

Conventional theories of child development are about culture as well as about children. The child depicted in psychology textbooks is in two respects, a cultural invention. The process of child

development being studied and the theorist's conceptual representation of that process are both strongly shaped by their shared context, in terms of family organisation, parental roles, expectations of childhood, economic base, political structures, gender/class differentiation, religious beliefs, life expectancies, and the like (Ingleby 1986, Burman 1994). It is inappropriate to assume that a concept of development derived from one context can or should be the basis for defining good and poor quality in other contexts.

Developmentally appropriate practice

One of the most influential attempts to define 'Developmentally Appropriate Practice' (DAP) has been made by the US National Association for the Education of Young Children (NAEYC) (Bredekamp 1987). This was a response to pressure within the US public elementary school system to extend expectations for achievement of school skills into the early years. Within that context, the NAEYC document served a powerful function, offering a 'scientific' defence of informal, play-based programmes for young children. Some of the features of their definition of developmental appropriateness were as follows:

Developmentally appropriate practice (DAP):

- Developmentally appropriate practice is based on universal, predictable sequences of growth and change;
- The teacher should take account of the age of the child and their individuality, in terms of growth pattern, personality, learning style and family background;
- Children learn best through play which is:
  - self-initiated;
  - self-directed;
  - self-chosen;
- The teacher's role is to:
  - provide a rich variety of activities and materials;
  - support the children's play;
  - talk with children about play.

This is a very familiar vision, emphasising activity, play-based learning, individuality and self-determination, all under the guidance of an adult skilled in a child-centred approach. The quality implications are fairly clear, in terms of a building and resources supporting the creation of a specialised environment for

children, plenty of space indoors and out, a wide range of equipment freely available to children, generous staffing ratios, high levels of training, and the like.

The child-centred vision of 'developmentally appropriate practice' resonates with very deep-rooted beliefs and ideals, widely-shared among Western-educated early childhood specialists – all the more reason why it must be acknowledged that this is a particular vision of child development endorsed by much Western psychological theory. Even within the USA, Developmentally Appropriate Practice has been challenged because it is insensitive to the cultural diversity in children's family experiences and parenting practices, and it risks resurrecting discredited judgements about deprived environments and the need for compensation (Mallory and New 1994). The NAEYC has now issued a position statement advocating responsiveness to linguistic and cultural diversity (NAEYC 1996).

The concept of developmental niche

One way of gaining a perspective on 'developmental appropriateness' is by applying the very different concept of 'developmental niche' (Super and Harkness 1977, 1986). 'Developmental niche' embraces both the tangible aspects of children's physical and social environment as well as the more elusive but equally powerful meaning systems that regulate their relationships – the expectations of children that affect the way they are treated and which the children themselves incorporate into their identity.

> Beliefs merge with values in helping to give meaning to practices by defining the kind of child (and adult) a particular society seeks to produce in the socialization process. Some cultures want children to be obedient, others foster a questioning child. Some tolerate aggressiveness; others do not. Some strengthen individualism; others a collective orientation and strong social responsibility (Myers 1992).

It is one thing for Western-educated early childhood specialists to apply the idea of a development niche to practices and belief systems in rural Kenya, India or Latin America. It is not so easy to focus the social scientific lens on so-called 'modern' methods of child care and education, recognising that these are also developmental niches. It is even more difficult to recognise that many 'modern' childcare beliefs and child development theories are part of these niches, in that they inform the way children are treated, how their behaviour is interpreted and what is considered

'developmentally appropriate' (Goodnow and Collins 1990). As an illustration, Box 11 outlines the features of the developmental niche for child care in the crèche parentale, France.

Box 11

A developmental niche for 0-3s in France

The French study highlights the features of the childhood niche occupied by a group of European under-threes. They include:

- An environment full of specially constructed physical materials, objects, tools and activities, to which children are given relatively free access;
- High levels of individualised adult attention available to children, and usually tuned in to their immediate concerns; a variety of different adults available to respond to children's requests;
- An egalitarian relationship between adults and children, founded on joint negotiation and exploration (at least for some parts of the day);
- The active involvement of fathers as well as mothers, playing with their children and carrying out routine child care tasks including nappy changing;
- A context of diverse experiences and opportunities for exploration, including diversity among care givers, in terms of ethnic/cultural/religious beliefs, styles of dress and behaviour;
- A shared goal of conceptual representation, systematic generalised ways of making sense of a complex physical world;
- An emphasis on technical mastery over activities, constructional toys, the equipment and procedures of the environment;
- A strong emphasis on verbal communication, articulation of concepts and shared understandings;
- Early introduction of symbolic representations, through drawing, picture books, stories, etc.

These features fundamentally influence psychological development among very young children, in terms of relationship patterns, role relationships, including gender differentiation, individualised identity, self-efficacy, sense of self, orientation to the physical environment, mastery of the technology of manufactured play material, sense of personal ownership, communication skills and language learning. While certain features are specific to the programme design of the *crèche parentale*, others are expectations of 'basic quality' care that would apply very widely among urban, affluent societies, but are in sharp contrast to the expectations and prospects for 0-3s in other parts of the world.

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Robert LeVine *et al* (1994) offer a metaphor for understanding the elements of the developmental niche. Drawing on a computer analogy, they distinguish:

1. **The organic hardware**: The species-specific, biological features of childhood that are interpreted as basic universal needs linked to survival, growth and health;

2. **The ecological firmware**: This comprises the socio-economic conditions, social stratification, family structures and employment patterns which provide the context for child care arrangements. 'Traditional' and 'modern' patterns of child care are adaptations to contrasting contexts. In each case, child care arrangements are adjusted to family/employment circumstances and children are socialised to grow up into these circumstances. The ecological firmware is not fixed but there is relative continuity.

3. **The cultural software**: This comprises the belief systems, goals and expectations of children, informed by a more or less intuitive understanding of 1 and 2 along with more local and individual considerations shaping children's daily treatment.

To illustrate this framework, LeVine *et al* compare traditional caring among the Gusii of Kenya with modern care by middle class families in Boston, USA. Among the Gusii, a high birth rate combined with a high mortality rate placed a premium on nurturance during the early years. Care giving comprised close physical contact, breast feeding on demand, and sleeping next to mother. This nurturant style did not incorporate high levels of stimulation or play between mother and infant. The emphasis was on quiet and comfort, combined with a certain aloofness of relationship, with little emphasis on joint activity or verbal communication. At the same time, the mother's responsibility both to manage a large family and cultivate the fields necessitated a significant contribution from children from an early age. So the baby would be entrusted to the care of an older (usually girl) sibling, who would carry the baby on her back, play with it and bring it to the mother for feeding. By the age of three, toddlers were already being trained to carry out small domestic chores, in a subsistence economy where even the youngest members were expected to play their part. The emphasis was on deferring to elders and obeying the mother's instructions; praise was offered sparingly. While there was limited space for children to negotiate or challenge parental authority, there were opportunities for play and mischief as part of children's wider ranging familial and peer relationships.

Le Vine *et al* argue that this picture of Gusii childhood contrasts sharply with the affluent, technically and medically sophisticated USA for the very reason that the conditions, priorities and goals for childhood are so different. For infants growing up in Boston, survival is virtually assured. There are strong expectations on mothers and other care givers to establish close emotional and playful relationships with infants, a relationship involving reciprocity and mutual responsiveness, where subdued infants are stimulated, and curious infants are encouraged to explore. Children are provided with plenty of psychological space; they are treated as individuals and encouraged to express their feelings and wishes. Clashes of will are not only expected, but to some extent encouraged, within a framework emphasising autonomy, assertiveness and independence.

The power of these very different standards of quality care is conveyed in speculations about how one set of mothers might view the practices of the other. For example, while a mother from Boston might view the Gusii practice of demand feeding as 'spoiling the child', the demand for obedience as 'repressive' and the use of children (as young as five) as care givers as 'abusive', the traditional Kenyan mother might see the Western practice of leaving infants to cry themselves to sleep in a bedroom as 'abusive', toleration of the challenging behaviour of the toddler as 'spoiling', and encouragement of playful fun as 'over indulgent'.

Of course Le Vine *et al*'s study contrasts two highly specific communities. Generalisations from these particular cases would be inappropriate. There is also a danger of fixing in time patterns of child rearing that are changing, as well as overlooking competing influences within a niche related to ecological and sub-cultural groups, social stratification and ideological/religious belief systems. Nonetheless, the concept of developmental niche facilitates taking into account the relationship between ecological pressures and child rearing values and practices; this may have important implications for what counts as quality in early childhood programmes.

Box 12

The developmental niche for early childhood – an example from Venezuela

The local study in Venezuela investigated the developmental niche by asking mothers and day care mothers how their children learn, about the role of play and the importance of discipline. When asked 'Which is most important for children's development, play or discipline?', only eight per cent of mothers replied 'play', 52 per cent replied 'discipline' and 25 per cent thought they were equally important. The pattern for day care mothers is similar, although they gave a little more emphasis to 'play' (24 per cent) compared with 'discipline' (44 per cent). Parental comments included:

> An undisciplined child is ugly; discipline ... is important in the life of the child ... because they turn out obedient and don't make one look bad (quoted in Teran de Ruesta 1995).

Although these mothers emphasised discipline, they were not aloof or cold in their relationships with their offspring. On the contrary, they placed equal emphasis on giving affection to their children.

If care givers place greater emphasis on discipline than play, how do they view children's learning? The investigators found that the question 'How do you promote children's learning/development?' produced the following pattern of replies:

	Day care mothers %	Mothers %
Teach/Explain	50.0	65.0
Motivate/Patience	18.3	19.4
Play	13.3	9.1
Imitation	18.3	3.8
Punishment		1.3
Don't know		1.3
Total	100	100

Both mothers and day care mothers emphasised the importance of teaching their children. The day care mothers were more likely to identify 'play' as a technique, although in practice few materials and opportunities for play were available in the day care homes. The authors comment:

> When the day care mothers and the children's mothers want the children to learn something (most) 'sit down and teach them, explain, repeat and speak to them', while others resort to different strategies: they motivate with patience and affection, give examples or invent things. Very few set forth the possibility that children can learn by doing and playing. The child is seen as passive in relation to his or her environment. They do not consider of value, for the children's learning, the natural play situations or the spontaneous interactions which occur in the day care home/multi home. Rather they assign great value to words and advice. The majority handle situations such as stimulating learning, toilet training, and discipline in this way (Teran de Ruesta et al 1995).

This picture was reinforced by observations of children's behaviour and interactions with day care mothers. Seventy five per cent of verbal interchanges were initiated by day care mothers, in comparison to only 25 per cent by children in the day care home. In the multi homes the proportions were even more extreme (83 per cent day care mother initiated, versus 17 per cent child initiated) (Teran de Ruesta et al 1995). These exchanges were mainly initiated by day care mothers to direct the children's behaviour, for social functions and to interpret events. However it would be wrong to interpret these findings as indicated that children remain mute in the day care setting. Far from it. Very high levels of child-child interaction were also observed. These observations are in sharp contrast to those reported by the local study of *crèches parentales* in France (see Boxes 11 and 15).

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Adopting the concept of developmental niche encourages a more ethnographic appreciation of particular care practices in the total ecology of child development, within as well as outside the programme. For example, it discourages harsh first impressions that children's environment is 'unstimulating' and 'regimented' or that care givers are 'severe' and 'repressive'. It encourages a more empathic appreciation of the functional relationship between socialisation practices and cultural priorities. This concept makes it more possible to recognise how misguided it would be to assert the necessary superiority of child-centred, individualistic, play-based approaches; how this risks challenging parental authority and undermining adults' and children's interdependent roles and responsibilities, especially where livelihoods are still largely based on self-sufficiency and cash crops. In such settings, the expectation of obedience, the emphasis on training and the absence of child-directed learning have been an adaptive response to social ecology.

Reflecting on the experience of crèche programmes in Tamil Nadu, Radha Paul made the point succinctly, thus:

> While assessing the quality of interaction between the crèche worker and the children, we have to be guided not by the Western ideal but the Eastern reality; not by the Western priorities but the Eastern limitations; not by the Western values but by the Eastern; not by the Western cultural norms but by the Eastern norms; not by the Western socialization process but by the Eastern pattern of socialization; not by the Western democratic milieu but by the Eastern hierarchical milieu; not by the Western concept of self-dependence but by the Eastern concept of interdependence. The differences are real and extremely significant (Paul 1995b).

In arguing for this contextual framework, I am not counselling *laissez-faire* inaction over quality issues. What I am rejecting is claims about the universal value of particular kinds of play, or the universal appropriateness of particular approaches to discipline, which do not acknowledge the historical and cultural origin of these values and practices.

The social ecology of childhood may be changing fast, while care giver belief systems informing treatment of children may be moving more slowly. Traditional practices may be less adaptive to future lifestyles. From the perspective of external agencies, including programme managers, NGOs and researchers, there may be a strong case for change. But this change can best be achieved through active dialogue among care givers, parents and others, to achieve a self-

conscious, self-empowering process of transformation of beliefs about 'quality'. Furthermore, the outcome of this process should not be assumed to entail incorporating dominant beliefs and values about early childhood. There are multiple pathways to quality to be negotiated through local study and imagination. As the authors of the Venezuelan study put it:

> The conceptions shared by the day care mothers and the children's mothers concerning the handling and care of the children reveal an ethnotheoretical approach which is important to examine, not for the purpose of evaluating it as a set of child rearing practices, but in order to understand what happens in the program, the type of experiences the children have as they go from one micro-system to another, and above all to initiate with the mothers a discussion which will help consolidate or modify their conceptions and customs, in the context of their culture and life situations (Teran de Ruesta *et al* 1995).

Box 13 applies the same ethnotheoretical framework to the experiences of three year-olds in rural Kenya.

One of the major themes of this report is that the current polarisation between traditional child rearing and modern 'developmentally appropriate' practices is at best unhelpful and at worst damaging to making progress in quality development.

Cigdem Kagitcibasi (1990), attempted to move beyond polarised thinking, and suggested a third way forward. First, she contrasted urban, Western, 'modern' societies, and rural, agrarian, 'traditional' societies. The view of human development that informs much 'modern' early childhood thinking (including the concept of Developmentally Appropriate Practice), is an extension of an individualistic view, with its emphasis on the psychological value of the child to parents, the socialisation goals associated with independence, and a style of rearing which encourages autonomy, with a strong emphasis on personal, cognitive and social development. This contrasts sharply with the interdependent outlook in 'traditional' agrarian societies where obedience training is emphasised and there is little place for encouraging play, for choice, or for the exploration of ideas and beliefs.

In the face of social change it could be argued, the sooner the Western model of child development is adopted the better, since child-centred, activity-based, individualistic programmes are most likely to serve the process of modernisation. Under such circumstances, views on quality could become standardised within a

Box 13

The developmental niche for early childhood – an example from rural Kenya

The local study in Kenya focused on a sample of 300 three year-old children living in 10 clusters of small villages in Machakos District.

When asked about the costs of having children, ensuring sufficient food was the main concern, especially amongst the poorest rural families. Their children's diet was mainly carbohydrate-based 'ugali' and in 10 per cent of cases families reported only being able to offer their children one meal per day. The next priority was affording medical care if their child became seriously ill or in the event of an accident. The nearest hospital might be many miles away, and arranging transport might be a problem. Next came the cost of schooling – parents are expected to pay for school uniform and materials, even for the nursery school.

Views on the benefits of having children were also strongly shaped by the extent of poverty. Faced with issues of survival and subsistence, parents value their children in terms of instrumental goals – their ability to contribute in practical ways to the family income – they are much less likely to view their children's education as affordable. They also give relatively less attention to the 'psycho-social' benefits emphasised amongst parents in more affluent nations where children's economic role is as consumers rather than producers (Hoffman 1987).

Community awareness of these costs and benefits shapes their view on what their three year-olds must learn, and how it can best be taught. For these Kenyan parents, the priority was health and cleanliness, politeness and respect, safety and danger, how to carry out domestic chores and so on. There is a clear authority structure in these communities, with clear distinctions related to age and gender. Children are taught to be cautious and respectful to their elders – imitating the model provided by adults was seen as by far the most important method of learning, followed by teaching and learning by practice. Play was not valued as an approach to learning amongst these families. While there were many opportunities for children to play with natural materials around the home, on their own or with their siblings, parents rarely participated. Not surprisingly, play for these three year-olds did not depend on the manufactured toys, play equipment and games, that are offered in profusion to most western children from the moment they are born.

Great variability was observed in the way parents related to their three year old children. In some families there was little evidence of interaction; in others a great deal. Commonly, these parents were highly directive towards their young children. Children did not expect, nor did they receive, the kinds of praise and rewards for appropriate behaviour that are widely regarded as 'good practice' in the West. Their mothers expected them to contribute to daily life by way of simple tasks alongside parents or siblings. Almost 30 per cent were expected to do specific chores, already by the age of three. These ranged from sweeping, cleaning cooking utensils, and helping with laundry, to drawing water, collecting firewood and tending livestock. Children could expect to be scolded or punished if they failed to carry out their responsibilities properly (Koech and Gakuru 1995).

unified model of child development. Kagitcibasi proposed that this may not be the inevitable nor necessarily the most appropriate model to follow. She offers a third view better characterising the experience of many developing societies, in which the child's development has acquired psychological value, but in the context of family patterns still emphasising interdependence and respect for parental authority. In such settings, the developmental appropriateness (and hence

quality) of an early childhood programme, might be judged very differently from the NAEYC model quoted above.

Practice appropriate to the context of early development

I propose an alternative framework of thinking, integrating the concept of 'developmentally appropriate practice', with an equally fundamental principle 'contextually appropriate practice'. The emergent hybrid is PACED – 'Practice Appropriate to the Context of Early Development'. This cannot be prescribed as an approach to care, teaching method or curriculum. Instead, it identifies a process of contextual appraisal of the appropriateness (hence quality) of child care environments, practices and approaches to learning and teaching. It builds on knowledge of the universal features of children's development as well as on contextual variations; it articulates how these reflect both invariant maturational characteristics of the human infant as well as variable and changing developmental niches. It can be summarised as follows:

- Contextually appropriate practice is based on local variations in children's experience of growth and change;

- The teacher/care worker should consider the age and individuality of children as well as their social context, their role and relationships within family and community, in terms of cultural patterns, language experience, lifestyles, and so on;

- Early childhood programmes should be consistent with, and complementary to, children's experiences within family and community. The goal should be mutual understanding, support and co-operation;

- Young children can learn in a variety of ways:
  Individual and social play;
  Imitation of others;
  Instruction by adults and other children;
  Exploration;
  Group activity.
  Which is appropriate depends not only on their age and their stage of development, but also on the goals and resources of the learning environment.

- The teacher/care worker's role is adapted to the resources at their disposal as well as their knowledge of children's experiences in family and community. The role can include: serving as a model for them to imitate, structuring the

> environment for their learning, supporting their spontaneous play, teaching them culturally relevant skills, encouraging values and standards of behaviour expected in the community, and helping them interpret the complexities of their social environment.

This contextual view of quality development might be construed as backward looking, reinforcing outmoded traditions, and impeding the process of necessary modernisation which can enable children to reach their full potential. On the contrary: an emphasis on contextual relevance enables communities to move forward in diverse ways towards the construction of children's futures. A PACED approach respects basic biological, psychological and developmental needs and rights, but in a way consistent with societal circumstances, values and aspirations at national, regional, community, family and programme levels.

The oft-quoted goal of 'enabling children to reach their potential' is generally proposed within a framework of very narrow expectations about their potential. Reaching potential can mean many different things, from learning the precise craft of a stone carver, or the business skills of a street trader, or the exquisite movements of a dancer, or the spiritual depths of a monk (Woodhead and Woodhead 1991). Human infants are born with vast potential for development in many more ways than even the most well-resourced modern education exploits (Gardner 1984).

A community must make choices about which 'potentials' it wishes to foster in the young and how. Parents, care workers, programme managers and funding agencies may adopt a model of early childhood education and care originating in Europe, North America or elsewhere. But if they do so, it should not be by default, but should be the product of a self-conscious appraisal of the congruence between local aspirations for early childhood and the cultural/economic assumptions, goals and expectations implicit in the imported model.

Of course, the model does not have to come from the West. As one commentator put it – communities can 'become more modern by being less Western' (Wober 1975, quoted by Serpell 1992). Or, to put it another way:

> New 'indigenous' models of ECD must be developed, based on the knowledge and experience of families and communities and adapted to local conditions. These models would combine the covert learning processes of traditional socialisation with the overt teaching methods of modern

> educational practice. They would thus recognise and accept the validity of local experience and traditional wisdom and be open to the global human environment as well (Bernard van Leer Foundation 1994).

Rather than being a model of caring, teaching, and learning, a PACED approach is an antidote to such models, a principle which permits the generation of any number of 'indigenous' models, in ways consistent with local goals for and approaches to child development. Difficult issues must be confronted, especially in reconciling certain 'local goals for and approaches to child development' with children's basic needs and rights. These issues have been widely addressed elsewhere, both in the context of international study (for example, Alston 1994, Freeman and Veerman 1992), and at regional level (for example, Dakkak 1993, Indian Council for Child Welfare 1994). They are part of an ongoing process of debate throughout the world, as the status of childhood is progressively defined and redefined. Negotiating a shared understanding of childhood quality is not a 'once and for all' event. It has a history, and it also has a future.

Chapter 7

Extending the principle of 'contextual appropriateness'

School systems and early childhood quality

So far, I have argued that negotiations about quality must take account of context with respect to material and human resources, and to the social ecology of childhood, especially the micro-system of the family. One other crucial context must be added: the school system. Because schooling is the principle agent of socialisation besides the family and a major determinant of life fortunes, the anticipation of schooling can have a powerful impact on the teaching goals, methods and behavioural expectations of early childhood programmes.

The goal specified by the 1990 World Summit for Children, of extending basic education to all children by the year 2000, is probably the single most powerful globalising influence on the experience of childhood. Consequently, quality issues for early childhood services cannot be addressed by reference simply to what goes on within those programmes nor solely by considerations of 'developmental appropriateness'. Account must necessarily be taken of what follows, in terms of school organisation, teaching methods and curriculum, as these impinge on the experience of children and variously reinforce, disrupt or ignore previous learning experiences.

These are generally treated as issues of 'transition' and 'continuity' (See for example, Bernard van Leer Foundation Newsletter, 70, 1993). There are numerous historical, physical, organisational, pedagogical and philosophical factors influencing how far children experience a smooth or abrupt transition. Early childhood programmes relate to the school system in many different ways. Some are organisationally integrated as part of a continuous process (for example, the Netherlands); others are planned as positive interventions giving children a better chance to avoid early failure and dropout (for example, Headstart in USA). A few (for example, Norway) self-consciously offer a contrasting model considered more appropriate to the early years (Cochran 1995).

Whatever the formal relationship to primary school education, the fundamental point is the same – perspectives on quality in early childhood programmes are (to greater or lesser degree) shaped by the school system that follows. The influence need not be one way. The quality of early childhood programmes should not be assessed simply in terms of whether children show greater 'readiness' for schooling. Quality issues need to be addressed in the context of a wider appraisal of the primary education system. In other words, we also have to ask about 'the readiness of schools for children' (Myers 1992, p 251).

To illustrate this theme, consider the way features of the Kenyan education system shape the goals and methods in nursery schools and classes.

Schooling in Kenya is highly competitive, with assessment, selection and ability-ranking a regular part of children's experience throughout their school career, with some children failing to get a place in school and many more 'dropping-out' during the early grades. Pre-school has come to play a central role in this process in two major respects: in terms of access, and in terms of curriculum (Gakuru 1979, 1992).

Access:
In principle, primary education in Kenya is available to all. But the administration, shortage of places and funding arrangements for schools ensures that in practice this is far from the case. The government of Kenya pays for teachers' salaries, but building and other costs are borne by local authorities, who in turn (especially in rural areas) pass on these costs to local communities. In this way there are significant hidden costs to poor families (school uniform, books, contribution to building maintenance, lack of any meal provision) and in many areas, especially in the towns, there are not sufficient places. For the poorest parents, the most visible barrier preventing their children's participation in school is the purchase of school uniform (obligatory and universal even at nursery level). The consequence is a close association between the wealth of a community, the proportion of children actually attending school, the resources available for those that do attend and their academic achievement. These inequalities in resourcing and achievement are frequently associated with the historical origin of the schools, with former 'Schedule C' schools (colonially designated for Europeans) as the high cost schools for high flyers; followed by former 'Schedule B' schools (originally established to serve the large Asian community); with the majority of children attending former 'Schedule A' (African) schools. New middle class suburban schools add to the complexity of the picture.

There is a great deal of pressure especially among middle class and aspiring urban families for admission to those primary schools that are perceived to be of higher status. In this context, the head teachers of sought-after schools frequently adopt a selection procedure, not officially sanctioned by the authorities and based on an interview with the child, which may include tests in arithmetic and writing. The child who has been to an academically-oriented pre-school is clearly at an advantage. Attendance at a nursery for at least a year may even be one of the head teacher's admission criteria to the school. This close relationship between nursery attendance, school admission and academic progress is one of the major factors accounting for enthusiasm for nursery schooling, even among the poorest rural communities. Attending nursery is the first rung on a very rapidly narrowing ladder of educational opportunity. For the children of many of the poorest families, even this rung is too difficult to climb. They may be excluded simply because their parents are unable to pay for a school uniform.

Curriculum:
The second respect in which pre-school shapes children's educational fortunes concerns curriculum and teaching policies, and is especially related to the language of instruction. Language competence is a major pathway to social mobility in Kenya. Young Kenyan children who are going to progress in school face the formidable challenge (shared with children throughout the Majority World) of becoming fluent in several languages by a very early age. Typically they will learn three languages. First, during infancy they will learn their mother tongue, one of twenty major languages in Kenya. Very soon they will be introduced to Kiswahili, the national language that serves most aspects of social and commercial life, especially in heterogeneous urban areas, notably Nairobi. At school, and sometimes before they go to school, they will learn English, which is the access language to professional, business and elite positions. In particular, English is the language medium in which children are taught in preparation for the major exam at Standard 8 (13-16) which determines whether they are accepted for entry to secondary school. Primary schools vary in the emphasis they place on these languages according to location (urban versus rural), their status, and the aspirations of their clients, and these varying language policies in turn influence the pre-school sector.

A brief example highlights some of the complexities, which both shape parental expectations for 'quality pre-school' and limit their children's prospects of achievement especially in poor and/or rural communities. In the Machakos study, mainly covering rural communities, 50 per cent were already beginning to speak Kiswahili

by the age of three, having acquired their mother tongue, Kikamba. These children would be likely to attend a primary school in which the local, vernacular language is the medium of instruction up to Standard 3, with Kiswahili and English both taught as a subject up to this level. For children progressing on to Standard 4 and beyond, the medium of instruction will become English, with Kiswahili remaining a taught subject. This contrasts with the experience of a child living in an urban area, where Kiswahili is the language of instruction up to Standard 4, when English also takes over.

These primary school language policies are the context that shapes the approach taken at pre-school level. Thus some nursery classes, especially in rural settings, teach almost exclusively in the mother tongue, perhaps introducing rhymes and songs in Kiswahili and English. Others, especially in urban areas, and especially serving communities with high aspirations for their children, concentrate on introducing children to Kiswahili, and also to the English language which will become increasingly significant as they progress. Finally, there are now a few pre-schools serving urban middle class communities where children are expected to accept immersion in English as the medium of instruction from the beginning.

In this way, the pre-school sector can serve an important gateway function, preparing children in language competencies that determine whether they are admitted to, and how well they progress within the school system. Inevitably, the demands of the school system feed back to parents and teachers in terms of their expectations of school-relevant teaching as the defining 'quality' at pre-school level (Kipkorir 1993).

This Kenyan example is not unique, either within Africa or in the rest of the world (Bernard van Leer Foundation 1994; Myers 1992). Although global, the issue is expressed in diverse ways. School systems vary considerably, but what they share in common is that their organisation and policies place particular demands on children, especially the abilities and skills that are expected on entry.

It is against this context that pre-school 'quality' has to be defined. Enhancing that quality is unlikely to be achieved without also considering what makes for 'quality' in the school system. I am not suggesting passive acquiescence to the expectations of the school system. Far from it. Reforming the school system so that the qualities of an early childhood programme can be sustained into the early grades is just as important as tailoring early childhood in anticipation of what follows. Negotiating 'developmentally-appropriate practice' is as important to the primary school years as to the years of early childhood. But 'developmental appropriateness' cannot be divorced from contextual considerations, at either stage.

Quality for children aged 0-3

What has been discussed so far is quality in relation to child care and education programmes for children during the years immediately preceding entry to primary education. Increasingly, there is demand for such programmes to be extended to much younger children (Cochran 1993).

Increased participation of women in wage employment, mostly outside the family, is combining with the breakdown of conventional support networks through mobility and urbanisation to challenge the adequacy of traditional care systems (Himes *et al* 1992). Where very young children are concerned, the issue is not simply about the quality of child care programmes. It is also about employment patterns built around mechanical, time-keeping, production-line efficiency considerations rather than about human, family, lifestyle considerations. It is about the pressures on economically and socially disadvantaged women, charged with responsibility for child rearing, but denied resources and support by an infrastructure still largely dominated by men. Enhancing the quality of care entails numerous strategies: providing substitute care in crèches, day nurseries and family day care (childminders); providing support/parent education to care givers; and modifying the conditions of employment for parents to make employment more compatible with responsibilities for children (Landers 1989).

Box 14

Child care for three year olds in rural Kenya

Traditional networks of care remain highly significant for the three year old children in the Kenyan local study (Koech and Gakuru 1995). Most were growing up in stable, village communities with a strong sense of collective identity. Although mothers were seen as the major caregivers for 74 per cent of children, they were also looked after by a wide network of relatives, siblings and neighbours. But there were signs of social change even in these rural communities. Many of the young fathers were absent, seeking wage labour in the towns. Some of the mothers had also taken work away from the village. In these circumstances, many grandmothers and other older women were taking care of the babies. This could present serious nutrition problems for a community where babies are traditionally breastfed up to the age of two and there are no adequate, affordable substitutes for breastmilk.

While informal family/community-based care is still the norm for children up to their fourth birthday, there were 22 nursery schools/classes in these communities, catering mainly for four and five year olds. Official policy was that children younger than four should not be admitted. Nevertheless, 26 per cent of the sample of three year olds in the Machakos villages were in fact attending, a reflection of the emphasis on education as well as the increasing demand for care. These young children were generally confronted with a large group with child/adult ratios ranging between 17 to 1 and 51 to 1. They were expected to sit on long rows of benches, or on the floor. Group teaching was the norm, with a strong emphasis on teaching the alphabet and numbers. Play materials were not available. Head teachers reported that the school environment was not suitable for very young children. They suggested that these children were too young, quite demanding, they cried a lot, were easily hurt and usually experienced more problems on admission than older children (Koech and Gakuru 1995, p 44).

There has been extensive development of non-familial care programmes for 0-3s, for example in Europe, North America, China, Australasia (Lamb *et al* 1992, Cochran, 1993, Melhuish and Moss 1991). However, among the four local studies, only the French example was targeted specifically to this age group. The programmes in India and Kenya both included significant numbers of two- and three-year-olds, as well as small numbers of infants and toddlers. For the most part, these programmes were not adapted for this youngest age group (see Box 14). The home day care model in Venezuela was more suited to the youngest age groups than the large, (often large group) institutional models in Tamil Nadu and Kenya. There can be little dispute about the inadequacy of current arrangements. Passive absorption of 0-3 year old children into institutional settings planned for 4-5 year olds according to a model of teaching designed for 6-8 year olds is unlikely to be developmentally productive – by any standards.

The local study in France is not only of interest because of the specific focus on 0-3 year olds. A special feature of the *crèches parentales* movement is the active involvement of parents in every aspect of running a day care programme.

In France there is a long tradition of economic activity among women, in agriculture, commerce and industry. For example, in

1982, 72 per cent of mothers with one child under 3, and 76 per cent of mothers with one child over 3 were in employment (only 25 per cent on a part-time basis). At the same time, mothers with larger families are less likely to be working – only 27 per cent with three children, one of whom is under 3 years (Combes 1992). The emergence of a new day care model, the *crèche parentale*, can be seen as a reaction to the state-run, centralised, professional, institutional tradition of French pre-school services. The crèches were initiated in the 1970s against a background of popular challenge to authoritarianism and the search for new forms of relationship, family life and ways of caring for children. Frustrated by the lack of public provision for 0-3 year old children, parents joined together to find a shared solution, renting buildings or using large apartments, taking turns to take care of the children and (where funds permitted) employing some professional help. As one of the leaders of the movement writes:

> At the heart of it all, 'empowerment'. Once parents start to participate in local development and provide a service, they also begin to exercise their rights as citizens. They are no longer content simply to formulate needs and wishes, but want to take active steps to see that their desires are fulfilled (Combes 1992).

A recent initiative in urban areas has been to use the context and opportunities of the *crèche parentale* to combat stereotyping and promote multiculturalism. This goal extends to the way those working in the crèche perceive differences in the behaviour of the children in their care:

> We train the care givers to be aware of these differences and to be prepared to talk about them with the parents without judgement. They learn to understand how a culture works and how it is reflected in the behaviour of the children. For example, in certain cultures children may shout, while in others children are expected to be quiet. The care givers should not make a value judgement ... but should realise that it is just part of the child's culture (Combes 1994).

Box 15 illustrates the potential of parental involvement in a small number of multi-ethnic *crèches parentales*.

Box 15

Involving parents in young children's care and learning – an example from France

The local study in France focused especially on the educational quality of the interactions between adults and children as they explored and talked about material objects, toys, games, books, and other resources in the *crèches parentales*. The investigators video-recorded interactions in four crèches over a five-month period, yielding 44 hours of data. This was analysed in terms of the complexity of the interactions, their cognitive richness and the kinds of guidance offered by adults to children. The authors believed that parent-workers would offer a 'natural', 'uncontrived' interaction based on shared exploration of play possibilities.

> In parental pre-schools *(crèche parentale)*, parents usually spend one half day per week 'on-duty' in the pre-school. If a parent, for example, the mother, has taken on the responsibility of conducting an activity with a child or in helping a child complete an activity of its own, she is in a situation where she has no known routine or procedure either for how to resolve the task under way or how to help the child. Her attention must therefore be entirely focused on the interaction precisely because the activity is new or in any case not a daily occurrence. Hence she will be truly 'involved' in the activity (Tijus et al 1995).

The first important finding was that social disadvantage is related to quality of adult-child interactions, for both mothers and children. Children from the most disadvantaged circumstances engaged in fewer and less complex interactions with adults. When their parents were working as care givers in the crèche, the same trend was observed. However, the quality of interactions did appear to be linked to the degree of parental involvement, for both parents and children. In other words, disadvantaged parents who were very involved in the crèche engaged in more complex interactions than those that were little involved, and this was also reflected in their own children's interactions with adults in the crèche. The investigators speculate that these associations may in part be due to the confidence- and skill-building benefits of working in the crèche.

> The parents acquire a sense of pedagogical responsibility in the day care center: they see themselves as 'teachers', they think about pedagogical issues and thus develop their pedagogical capacity. It may be assumed that the latter will be linked to their degree of participation in the day care center (Tijus et al 1995).

These features of the child care environment in *crèches parentales* are in marked contrast with those identified by the other local studies. The study raises important issues about whether the benefits of direct parent involvement and responsibility would translate into a more generalised model for early childhood programmes. For example, is the model applicable to contexts where parents (especially fathers) may be less available (and willing) to participate, and if they did participate their expectations for interaction with their children might be different? Equally, what are the implications for care worker training, teaching skills and attitudes that enable parents to contribute positively to the educational experience of their children?

Given the variety of possible arrangements for child care, quality issues should be tackled within local frameworks. Early child care must support children's fundamental needs, patterns of growth and development, but it must also be shaped by social ecology, cultural beliefs and aspirations, as well as the availability of material and human resources. Nevertheless, there are boundaries of adequacy. For very young children these boundaries are defined by their vulnerability and dependency, their need for close nurturance, and

the rapid transformations taking place in their competence and orientation.

The period from 0-3 is especially significant in terms of rapid physical growth, including maturation of the brain that is so dependent on adequate nutrition; in physical mobility, from sitting-up to crawling, walking and running; in motor dexterity, from basic grasping to eye-hand co-ordination, to the beginnings of tool-using; in terms of relationships, establishing a small number of core relationships in infancy that become the base for emotional security and the context for early communication, play and learning; in language, moving from pre-verbal communication through proto-conversation to complex use of the mother-tongue to understand and express wants, fears, observations and understandings; and in terms of social development, forming a more or less differentiated sense of personal identity within the family, among peers and other members of the community.

Many of these features are universal, and must be recognised and supported by any child care system. The form that this support system takes is less universal. In other words, considerable scope for variation exists in the arrangements for care, socialisation practices and childrearing patterns sustaining and indeed promoting early development. There is also considerable scope for diversity in the kinds of motor skill, qualities of relationship, functions of communication, forms of thinking, and degrees of personal autonomy shaped and promoted by these different care systems. In short, while agreement might be reached about a core set of universal features of quality, this still leaves a great deal of room for negotiation.

A start can be made by distinguishing the universal from the contextual as revealed by cross-cultural research. For example, the emergence of specific 'attachments' and the expression of 'separation distress' follows a similar developmental course (peaking between 10-15 months), but the patterns of attachment, the way caregivers respond to the infant's distress, and the way these close relationships are regulated within the family can vary very considerably (Super and Harkness 1982; Van Ijzendoorn and Kroonenberg 1988). Secondly, purposeful adult activity designed to initiate young children into socially-valued skills is a feature of early relationships between toddlers and their caregivers. Comparing mother-child dyads in India, Guatemala, Turkey and the USA, Rogoff *et al* (1991, 1993) found that collaboration in joint activity was universal, but that there were important variations in the roles of adult and child, and in the extent to which these were embedded in a network of wider relations. While 'guided participation' was a

feature in all these settings, there were variations in the goals and processes of learning and teaching, which were in turn linked to the extent to which children's lives were segregated from the adult world of work. In other words, these communities illustrate a variety of patterns of adult-child relationship. Each in its own way was developmentally appropriate.

The boundary between the universal and contextual is also illustrated by data from twelve diverse communities in the USA, Mexico, India, Philippines, and sub-Saharan Africa studied by Whiting and Edwards (1988). They compared caregiving on a very wide range of dimensions, including: extent of close contact, sensitive responsiveness, approach to play, control and discipline, attitudes to teaching, and encouragement of interdependence versus independence. Five general infant development goals were shared by caregivers in each of these communities:

- Survival (basic nutrition, health, protection from harm);
- Attachment (emotional comfort, physical contact, reducing anxiety and fear);
- Personal hygiene (toilet training, washing);
- Social behaviour (culturally approved behaviour);
- Learning (teaching essential skills for survival and social adaptation).

Specific goals for social behaviour and learning were of course much more variable, as were maternal strategies for achieving these goals. Whiting and Edwards found major contrasts in maternal emphasis on the following:

- Training (teaching specific skills to an expected level of achievement, for example, basic skills of cultivation);
- Controlling (using reprimands, threats and commands to regulate children's behaviour);
- Sociability (friendly, reciprocal, playful interactions);
- Nurturance (close contact and responsiveness to children's demands and needs).

How far universal features of parenting are the result of parental sensitivity to infant signals and how far they are a response to common features of social ecology is open to question (Bornstein 1991). More certain is the tendency for some non-universal maternal strategies to be generalised as if they did reflect common features of social ecology. Research carried out in Europe and especially North America has been especially influential on widespread assumptions about the characteristics of high quality maternal care. Yet Whiting and Edwards report that the maternal

style observed in the USA was distinctly different from the eleven other societies in their study. Mothers in the USA were ranked highest in the extent of their sociability with their children, and in the number of playful interactions in which children were treated as equals. Is it this image of individualised, playful, 'child-centred' childhood to become the standard for evaluating child care practice? If not, the challenge is to construct contextually-appropriate quality standards that:

(i) build on the childrearing traditions sustaining adaptive development for generations; and
(ii) that take account of the impact of changing social and economic ecology, rendering some traditions maladaptive, others non-viable, and opening possibilities for new forms of relationship, care and learning.

In the USA (as in other Minority World countries), the public review of child care issues for 0-3s is well advanced, and specific recommendations have been elaborated (for example, the Carnegie Task Force, 1994). The PACED principle, Practice Appropriate to the Context of Early Development, applies equally to children aged 0-3 as to the programmes for older children. The Carnegie Task Force recommendations apply to the USA. Although they can contribute to widespread debate about these issues, they are not a substitute for that debate.

The 'needs of our youngest children' have to be negotiated at national, regional and local level. Agencies and care workers in early childhood can themselves play a vital role in this, through the model of caregiving they offer children within group programmes (family- or centre-based), through the support they give to child care systems within family and community, and through their active participation in debate and advocacy on behalf of young children – all built on their knowledge of local circumstances and priorities.

Chapter 8

Defining quality through research and evaluation

> The postulate of *value-free research*, of neutrality and indifference towards the research objects, has to be replaced by *conscious partiality*, which is achieved through partial identification with the research objects (Mies 1983, cited in Nelson and Wright 1995).

A major theme of this report has been that research and theory in child development and education is not neutral in identifying what makes for quality. One type of research in particular has great potential power to shape policy on the initiation, reform, extension or termination of programmes – evaluation research. Used in a self-conscious, context-sensitive way, that potential power can be an enormous asset. We now have evidence from a wealth of more or less well-controlled research evaluations pointing to the impact of particular early childhood experiences on children's emotional, social, and cognitive development, their school adjustment and achievement, and so on. From such research we should be able to infer what quality is; pragmatically this is true, but research does not provide unequivocal answers.

First, methodologies conceptualised and planned in Minority World research centres do not necessarily easily transfer to Majority World contexts. In particular, the dangers are well documented of attempting to administer psychometric measures, or carry out experiments with children and communities that have no experience or appreciation of the goals, communication styles and patterns of relationship on which those measures are based (Richardson, 1991).

As part of their profile of three-year-olds' development, the Kenyan study included an attempt to assess children's cognitive skills, using a series of simple sorting tasks. The adults carrying out the study had been specially chosen because they originated from the same language community as the children. The assessments were carried out informally in or near the children's homes. Even so,

the team found great difficulty in making a valid assessment. Many of the children performed very poorly and 28 per cent refused to cooperate at all.

It became clear that the task was not only unfamiliar but threatening to them. When asked to make a structure with bricks, some children appeared anxious lest the bricks fall down, which might result in them being scolded. When asked about differences between the bricks (in terms of such attributes as colour or size) it was clear that they lacked familiarity with these formalised classification skills. This was especially true of children from rural and low income areas and among those with no experience of schooling. This unfamiliarity with play materials, (or with the associated activities and ways of thinking), the unfamiliarity with one-to-one attention from an adult in the context of play, combined with a taught-wariness of strangers in these tight-knit communities, all combined to create a baffling and worrying experience for these children (see also Harkness and Super 1982). A more observational, ethnographic approach to the problem, based on familiar materials, relationships and activities might yield a more satisfactory account of these small children's competence in their environment.

Second, evaluations depend on the construction of measuring instruments to assess children's development, adjustment and learning. Accepting results showing that programmes have 'quality' involves accepting the outcome indicators as desired goals for children's development. It also entails accepting the reduction of human diversity to a series of normative measures. Such research is governed mostly by consensus of values about desirable child development outcomes. But there is nothing inevitable about this, and I believe that all policy-linked evaluation studies should incorporate a clear statement about the childhood values implicit in their research design.

A third caution concerns whether the conclusions of research are really so definitive as frequently claimed. For example, the past 40 years of research in Britain and North America into the importance of early attachments, the consequences of separations, children's tolerance of multiple relationships, the effects of day care, and so on, has been closely linked to changing attitudes and policies on child care. But it would be naive to imagine that the research has served as a dispassionate driving force behind these changes. Cultural beliefs combine with scientific method to shape the execution and interpretation of research.

Box 16

Assessment and developmental priorities – an example from Venezuela

As part of the local study in Venezuela, the investigators assessed children's skills and behaviour using an adaptation of the Child Observation Record (High/Scope 1992). By using observation, the team hoped to avoid some of the pitfalls associated with formal ability assessments. Eighty-one children aged two-to-five were observed in semi-structured play situations in a familiar setting. Briefly, they found that children were functioning at a high level on two dimensions: social development and motor coordination. They performed at rather lower levels in language (for example, describing events at home, retelling stories, beginnings of reading and writing) and in logical reasoning (for example, classification, ordering by size) although they were good at counting. More specifically, within the area of social development, the children performed very well in 'relating to other children' and 'independence' (self-help) but very low on 'autonomy' (independent thought).

In drawing conclusions, and perhaps in planning an intervention to modify caregiver priorities and practices, evaluators must make their child development assumptions explicit. *The Child Observation Record* is criterion-referenced, and is based on the theoretical assumptions of a particular curriculum model, the High/Scope Pre-school Curriculum. It was refined through extensive trials in American Headstart classrooms. The manual states that:

> The Child Observation Record assesses dimensions of child development that should be evident in all early childhood programmes that engage in **developmentally appropriate practice** as defined by the National Association for the Education of Young Children (High/Scope 1992, emphasis mine).

The investigators offer their own interpretation of the profile of competencies they observed:

> The high levels in the areas of social development and coordination reflect the value placed on these in the human environment in which the Program functions. These levels coincide with the comments of more than half of the day care mothers ... that they observe the greatest changes in the children's social behaviour ... They consider that the best games for promoting development are manipulative games and those which exercise body co-ordination. On the other hand, in autonomy ... low levels ... reflect ... the need for all of the children to follow the Day Care Mother's orders without questioning, to permit the effective functioning of a relatively large group which must keep to a tight schedule. These levels coincide with the opinions of the majority of the Day Care Mothers who consider discipline more important than play for the children's development, so that they will behave properly and respect people (Teran de Ruesta 1995).

In addition, research rarely yields straightforward answers. For example, Phillips (1987) collected some of the best American research on quality in child care. Even within this reasonably circumscribed context, the results were not clear-cut. Although staff training and stability, along with staffing ratios, were associated with positive developmental outcomes, their impact was by no means straightforward. As the authors of one study conclude:

> Consistencies and inconsistencies between studies ought to remind us of the innumerable variables that may be acting as a smoke screen to, rather than shedding light on, the relationship between child care quality and children's development' (Kontos and Fiene, 1987).

Phillips (1987) argues for seeing quality as a configuration among indicators, none of which in itself has a determining effect on outcomes. In practical terms, what this means is that no single quality indicator is likely to have a decisive impact on children's development. What matters is the way clusters of factors interact to shape the quality of children's experience.

Fourth, and most crucially for any attempt to use evaluation research as the basis for a generalised view of quality, it cannot be assumed that the features that make for effectiveness (and by inference, quality) in one setting will necessarily apply in every other. Early childhood services are not a commodity. They are a specialised set of human relationships among children and adults, that are closely linked to wider systems of child development in family, school and community. Whether and how a particular feature of a programme influences a child depends on the context into which the programme is received.

To cite a very clear example, Everson *et al* (1981) found that one of the most powerful influences on children's adjustment to a day care programme in the USA had nothing to do with the qualities of the programme at all. What mattered was their mothers' positive or negative attitude towards their infants' day care. This is a further reminder of the power of a caregiver's beliefs in mediating the impact of the environment on children.

The significance of context for effects has been explored in relation to early educational interventions (Woodhead 1988). Research in the United States has been widely used to argue that an early childhood programme is an optimal strategy for enhancing the life chances of disadvantaged children (for example, Beruetta-Clement 1984). While there is no disputing the contribution early childhood programmes can make, whether they do so depends on their function in the community, and their relationship to the school system. These are the contexts through which any benefits to children are expressed, transmitted, amplified or attenuated. Thus valid quality assessment must be based on local evaluation research which defines programme process and outcomes in the context of family and school systems (Liddell 1987).

Instances of such research are growing. For example, evaluation of a pre-school intervention in the context of the Kenyan school system, might produce different results than in a country where school achievement is less affected by access and language issues. But the literature is still dominated by research in the USA (Myers 1992). The dangers of unqualified research imports is well

illustrated by the study of 'overcrowding' in South Africa, described in Chapter 4 (Liddell and Kruger 1989).

Finally, there is the problem of whether scientific method has the capacity adequately to encompass multiple goals for childhood. It is common to assert that early childhood programmes should be holistic, fostering all aspects of children's development, promoting 'multiple intelligences' (Gardner 1984), or to put it another way, encouraging them to reach their 'full potential' (or should it be 'some of their many potentials'?). At the same time, the detached objectivity that marks off Western positivist approaches to knowledge is not conducive to accommodating very different social and cultural assumptions, values and goals for childhood.

To give a blunt example, evaluators are well equipped with instruments to measure effects in terms of language, reasoning, motor skills, social relations, school achievement. But in many societies, the highest priority is given to children's spiritual development (as for example, in the pre-school programmes in Trinidad and Tobago; Cohen 1991). In seeking evidence on quality through systematic empirical research, do we unwittingly also have to accept the goals for early childhood that are associated with that tradition of enquiry? For example, how can evaluations based on instrumental school-related goals adequately encompass creative or aesthetic aspects of early childhood experience? Pence and McCallum (1995) raise a similar concern when they ask:

> Is caring measurable? Is it not at least in part transcendent? Is using scientific instruments and methodologies to understand caring not in some way akin to searching for God with a telescope.

Research-led innovations in early child development are an important part of the recent history of the field. A 'model programme' has the great virtue of being tangible, documented, often video-recorded, with training materials, and so on. It has the potential to be widely replicated at relatively low cost. Adopting such models can be appealing to funding agencies and local communities alike, and they can undoubtedly be an effective strategy for initiating change.

Pragmatically, such programmes have served an important advocacy function. They are persuasive to government ministers and officials, for whom political accountability makes it essential that programmes are visible, outcomes are measurable, and cost effectiveness is calculable. Examples include High/Scope in the USA (Berrueta-Clement *et al* 1984); the Home Instruction Programme

for Pre-school Youngsters, HIPPY (Lombard 1981); and the Turkish Early Enrichment Project (Kagitcibasi *et al* 1988). It is questionable whether 'quality programmes' can be packaged, evaluated for their effectiveness, and replicated on the same basis as any other consumer commodity. The approach rests on a commercial metaphor, whereas I have argued for a more ecological metaphor. My view has much in common with the distinction made by Howard Richards (1993) between a mechanical and an organic approach to innovation:

> Cultural innovations grow, sustain themselves, and eventually become normal conventional practices, in a way parallel to the way new biological species establish themselves. An innovative practice, like a mutation, survives and reproduces if it captures energy (Richards, 1993).

Achieving quality is a progressive process, not a final outcome. The history of an early childhood programme or child care system is the starting point for defining its future. This does not mean there is no place for innovation or assimilating alternative child development models. But the impact of externally-initiated innovations will depend on how they link into the intrinsic dynamic within the local context, on how far they address an issue that is already being recognised by those most closely concerned with the programme and by the community it serves. Or to put it in Richards' terms, how far they resonate with a 'growth point' within the programme or setting.

For example, programme managers attending the Bernard van Leer Foundation workshops in Caracas, Madras and Paris were asked to specify the priorities for quality development within their programmes. The answers were very variable indeed, and included improving basic health facilities; strengthening crèche workers' understanding of children's family circumstances; enhancing the quality of individual attention provided to infants; strengthening mother tongue teaching in a multi-lingual context, and so on.

Thinking in terms of growth points for quality within a particular context has implications for the issue of how, and how far quality standards should be assessed and regulated:

> Governments can ... play a role in setting standards and regulations. ... These are often set at levels that are too high. They effectively exclude the vast majority of pre-schools and community-initiated programmes. When this is the case, the standards tend to undermine community initiatives, rather

> than support them. The standards are often at real odds with parents' efforts to pursue and organise alternative forms of child care facilities for their children. (Bernard van Leer Foundation 1994).

Setting standards, assessing standards, measuring indicators – these are all key stages of quality development – with a number of provisos. If the aim is enhancing quality in context-relevant ways they are best seen as: formative not evaluative; practical not bureaucratic; participatory not prescribed; offering guidelines not regulations, in a way that is dynamic and not fixed.

Chapter 9 -

Steps towards quality

In this report I have proposed a contextual approach to quality founded on negotiation among stakeholders. My starting point was the evidence of diversity in early childhood development and early childhood programmes. Diversity is apparent in cultural beliefs and expectations about childrearing practices; in family/community systems for care and learning; in the extent and design of organised programmes; in the training and orientation of workers; in the availability of material and human resources for programme development; and in the infrastructures that can monitor, support and regulate quality in early childhood.

This diversity in practice is not matched by an equal diversity in theory. Students of child development and early education are offered a relatively narrow vision of the parameters of socialization, growth, learning and teaching. This vision originates mainly in Western scientific and pedagogical traditions, but it has a far-reaching influence on beliefs about quality in early childhood programmes. Debating the issue of what constitutes quality is especially important at a time of rapid economic, political and social transformation of children's lives, marked by increasing pressures towards globalisation.

To counterbalance these normative trends, I have argued that quality is not a fixed, objective standard to be universally applied, but a context-specific, dynamic process. Meaning different things to different interest groups, in different settings, and at different times, the quality of a programme cannot be judged independently of the social environment in which it is located. As in perceiving a rainbow, perceptions of quality are strongly dependent on perspective, which in turn is strongly dependent on context. Consequently, quality should not be seen in a restrictive, prescriptive way, but in a holistic, relativistic way, where the context of human and material resources and the social ecology of lifestyles, values and expectations of childhood are acknowledged. It is not something that can be achieved as an end product; rather, ensuring quality is a continuous process of innovation to new circumstances, and shifting priorities. Quality can best be achieved through active negotiation and collaboration, with children and

parents contributing to quality as much as care workers and managers who formally 'run' a programme.

Rejecting universal, individualistic views of quality in favour of a more relative, holistic framework for quality development and evaluation might seem at first sight to be self-defeating, in that this fails to offer clear, unequivocal indicators of quality standard, against which to assess programmes, initiate changes and improve the lives of children. This is not the case; I have argued that quality is relative but that it is *not arbitrary*. This means that I reject unquestioned replication of particular programme models, quality indicators, concepts of basic standards and so on in favour of encouraging locally-relevant models, indicators and standards. To guide this process, I offer a series of general principles.

The first is about resources, the idea of basic standards. There are gross inequalities in the material and human resources available to sustain early childhood programmes. Some large scale programmes are functioning at a minimal resource level consistent with children's basic care, health and welfare. Increasing the resources available to these programmes would be highly desirable. But pragmatically, there are many more possibilities for low cost, non-institutional solutions than are currently being applied, and in some circumstances, conventional solutions would in any case be inappropriate (see the Bernard van Leer Foundation Newsletter number 80, 1995). Employing 'basic standards' usually means applying external criteria derived from other contexts and child development systems. A preferable approach builds on the resources and the positive opportunities that do exist within a given setting.

However, there are limits. There are boundaries of adequacy, defined in terms of children's universal biological and psychological needs and rights. These are important boundary markers for quality. The problem is that many quality indicators that are taken to be about children's fundamental needs are actually about socially-constructed, contextual needs.

There is considerable scope for negotiation about what is contextually appropriate for young children. This applies as much to principles of child development and child care practice as to beliefs about children's needs. While scientific research offers some universal principles that can inform developmentally appropriate practices, much that is taken to be 'developmentally appropriate' is based on the particular cultural niche in which dominant, expert early child development knowledge has been generated. An alternative framework emphasises that practice should be PACED, that is, that it should be appropriate to the context of early development.

To put the point another way, the quality of young children's care and education is not just a by-product of resource availability, but reflects the very widely differing social contexts into which early childhood programmes are embedded. Childrearing traditions, family networks, school systems and especially parental belief systems shape what is valuable for early childhood and how it can be achieved. At the same time, child development specialists, teachers, and care workers are informed by other sets of belief and knowledge, often derived from Western psychology and educational theory.

A first step is to identify, articulate and negotiate these frameworks of belief and practice. The territory of childhood is marked by numerous possible pathways to development but professional practice, unfortunately, all too often assumes there is only one pathway. In her analysis of the impact of poverty on child development, Terezinha Nunes cites studies on pathways to moral development (by Edwards 1982) and literacy (by Brice-Heath 1988) along with her own work on mathematics (Nunes *et al* 1993). She argues:

> An intervention programme that seeks to transform the children living in threatening environments into what one might call 'textbook children' risks losing sight of the strengths of those children on whose behalf it is acting ... (Nunes 1994).

A prerequisite of quality assessment is the understanding that multiple factors shape how children experience a childrearing setting. Recognising the interweaving of traditional with modern, indigenous with imported, adaptive with dysfunctional can provide a strong basis for quality development (Evans and Myers 1994). Taking account of differing perspectives and negotiating a vision of childhood futures is part and parcel of this process, which can be carried out in different ways, at different levels in the child development system, from care workers talking with parents to state authorities preparing a policy statement.

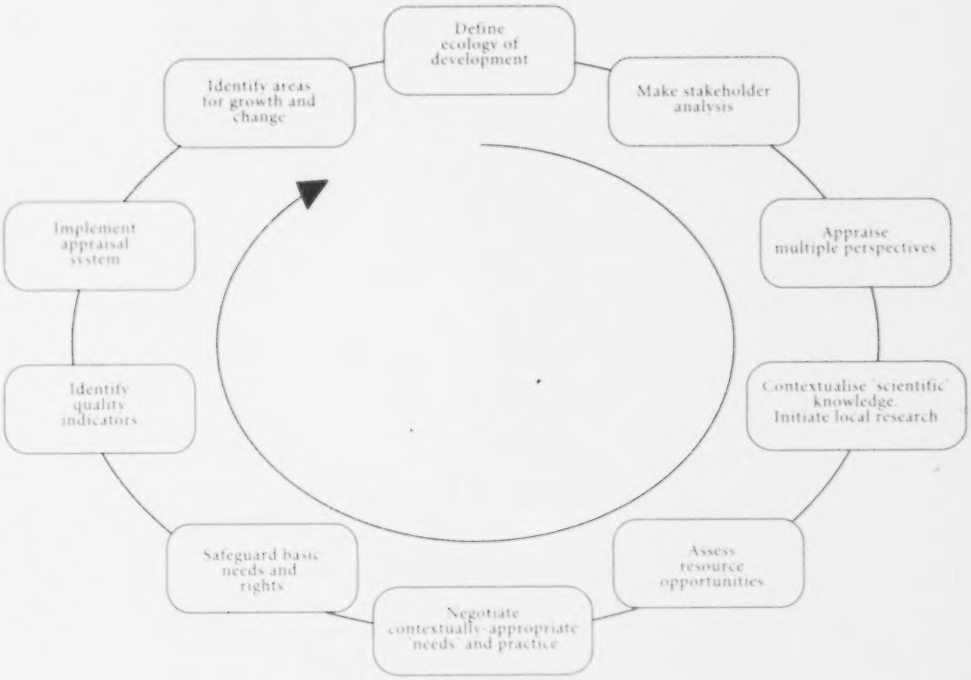
Accepting this perspective has significant implications for the role and training of early childhood specialists at every level, from the individual crèche worker to the field officer of an international NGO. The specialist may feel undermined by the prospect of taken-for-granted certainties being replaced by a more reflective recognition of possibilities. A role change may entail negotiating perspectives, being aware of tradition and change, and of applying child development theory and research in a context-sensitive way.

The first step is to achieve greater self-awareness. All those with responsibility for early childhood programmes can benefit from

making explicit the personal experiences, beliefs, values and theories that inform their perception of the needs and development of children, and the characteristics of a 'quality' programme. This reflective self-awareness can be the starting point for making explicit the rationale for programme organisation, the approach to teaching and learning, the character of adult relationships with children, and children's relationships with each other. Any programme appraisal must include an historical dimension – re-evaluating programme traditions in the light of changing circumstances and expectations. Account must also be taken of the other influences that shape children's lives. Children's experiences of learning in a pre-school setting will have repercussions for their experiences in other settings, in family, school and community; and *vice versa*. Criteria must be established about when low levels of resource threaten children's welfare, and when situations and practices violate children's fundamental needs and rights.

Research and evaluation have a crucial role to play in this process, but over-reliance on imported theory and data must give way to locally-cultivated research and development. Under all these circumstances, the process of change can be most effectively approached within a framework of commitment, energy and openness. We have inherited a legacy of lifestyles and childrearing systems that have been evolving over hundreds and thousands of years. We have to embrace the challenge of modernity in a way that encourages and empowers those that take care of, nurture and educate young children to take responsibility for planning the present, with a view to shaping the future.

Figure 4. Phases in a cycle of quality development


Define ecology of development
Make stakeholder analysis
Appraise multiple perspectives
Contextualise 'scientific' knowledge. Initiate local research
Assess resource opportunities
Negotiate contextually-appropriate needs and practice
Safeguard basic needs and rights
Identify quality indicators
Implement appraisal system
Identify areas for growth and change

Towards dynamic, contextually-appropriate quality development

In this final section of the report, I summarise many of the key emergent themes by offering a model of the cycle of quality development. Figure 4 summarises ten phases, each of which can be elaborated as a series of questions.

Phase 1. Define ecology of development

What are the major contexts for young children's care/education? What are their characteristics in terms of physical setting, social organisation, caregiver beliefs, expectations of and interactions with children? How stable are these contexts? In what ways are they changing?

How do characteristics and functions of each of these contexts interrelate in children's development? How far are they complementary? Where are the points of conflict? How far do they actively cooperate?

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In what ways do other community contexts impact on children's experience of care/education settings? For example, in what ways is children's experience being shaped their parents' employment situation?

What are the opportunities and/or constraints of the wider economic, legislative and political structure including changes in these structures, levels of poverty etc?

Phase 2. Make stakeholder analysis

Who has an interest in early childhood development as providers and/or beneficiaries? What is their interest in early childhood development? Which aspects are they interested in and at what level? What is their status, and their level of power and influence?

Phase 3. Appraise multiple perspectives

What are the stakeholders' beliefs about beneficiaries of the programme, goals, needs, approaches to practice, design and funding of provision, and so on? Where are the points of complementarity and convergence? Where are the conflicts of interest? How might competing perspectives be reconciled? What is the perspective and interest of the initiator of the quality development process?

Phase 4. Contextualise 'scientific' knowledge

What research, theories, models and approaches are relevant? What are the implicit assumptions and values about approaches to childrearing and goals of development? Can research be generalised to local settings? Where are the points of congruence/conflict between 'scientific' knowledge and local practice? What key themes would benefit from locally-based research, including small-scale practitioner-based studies?

Phase 5. Assess resource opportunities

What are the existing costs and resources, in terms of buildings, materials, human skills, infrastructures, training facilities, and so on? What is the scope for low-cost resource enhancement, in terms of using local human and material resource (for example, volunteers, parents, community, alternative settings, locally-found/crafted equipment, training opportunities)? How might positive community resources be harnessed? What are the cost effectiveness issues involved?

Phase 6. Negotiate contextually appropriate 'needs' and practice

What are the developmental characteristics ('needs') of children in the context of family/community experiences? How do existing programmes fit into the ecology of children's development? Are they consistent with a PACED approach? What programme goals for development/ care/education emerge from consultation with stakeholders? What are appropriate group sizes, curriculum emphases, play opportunities, teaching approaches, discipline styles, extent of individualisation, forms of parent cooperation, and so on?

Phase 7. Safeguard basic needs and rights

Are children's basic nutrition, health and safety being protected? Are programme characteristics consistent with basic needs and rights, and sensitive to children's ages during various stages of their development? How can protecting children from abuse be ensured, for example, through professional training, selection and supervision of care workers and volunteers?

Phase 8. Identify quality indicators

What basic, input standards are contextually appropriate? What would be observable indicators that agreed practice standards are being achieved at the level of process? What locally relevant outcome indicators can be identified/ constructed, in terms of health, school adjustment, and so on?

Phase 9. Implement appraisal system

What low cost systems will best monitor indicators of quality, at the level of input, process and outcome? How can this be implemented in the local context in a simple, supportive, non-bureaucratic way? What procedures will ensure that those concerned with the issue of quality are closely involved in the process of quality appraisal, including appraisal of their own roles?

Phase 10. Identify areas for growth and change

What aspects of the programme might benefit from innovation? What issues might become catalysts for change? How can energy for positive change be harnessed? What are the implications for resources, training, relationships with parents and community, and the like? How can change be most effectively implemented? What would the repercussions of change be for the wider aspects of the early childhood development system?

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David Mackay (ECD: Practice and Reflections No 9)

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Bernard van Leer Foundation
P.O. Box 82334
2508 EH The Hague
The Netherlands
Tel: (31) 070 351 2040
Fax: (31) 070 350 2373

Our perception of 'quality' in early childhood programmes can be likened to our perception of a rainbow. Composed as it is of sunshine and rain, it changes with every shift in perspective. And just as people have searched for the illusory crock of gold at the rainbow's end, so development experts search for universal definitions and standards of quality. But quality is contextual. Drawing on examples from several countries, Martin Woodhead argues that sensitivity to diversity and to one's own preconceptions should be key elements informing all early childhood work.

Bernard van Leer Foundation

P.O. Box 82334
2508 EH The Hague
The Netherlands
Tel: (31) 070 351 2040
Fax: (31) 070 350 2373

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